



TRACY UNIFIED SCHOOL DISTRICT OUT OF STATE TRAVEL RELEASE

FIELD TRIP: _____

LOCATION: _____

DATES: _____

PARTICIPANT

First name: _____ Cell phone: _____
Last name: _____ Grade: _____
Gender: _____

FIRST PARENT/GUARDIAN

First name: _____ Last name: _____ Cell phone: _____

SECOND PARENT/GUARDIAN

First name: _____ Last name: _____ Cell phone: _____

FIRST EMERGENCY CONTACT

First name _____ Last name _____ Cell phone: _____
Relationship: Parent Legal Guardian Relative Caregiver Friend Other
Authorized to pick up: Yes No

SECOND EMERGENCY CONTACT

First name _____ Last name _____ Cell phone: _____
Relationship: Parent Legal Guardian Relative Caregiver Friend Other
Authorized to pick up: Yes No

MEDICATIONS

| NAME | DIAGNOSIS | PHYSICIAN | DOSAGE AND TIME INSTRUCTIONS |
|------|-----------|-----------|------------------------------|
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| | | | |
| | | | |
| | | | |

ALLERGIES

Does participant carry an epinephrine auto-injector (Epi-Pen)? Yes No

Does participant have a life-threatening allergy to food, latex, medicines, foods, pollen, insect bites or stinging insects? Yes No

HEALTH/MEDICAL

Is there any general health/medical information that should be shared? Yes No

If yes, please explain:

OUT-OF-STATE PARTICIPATION AND TRANSPORTATION AGREEMENT- RELEASE

I, the legal parent/guardian of the student named above, grants my permission for my student to participate in this out-of-state field trip.

It is understood that participation in this out-of-state activity, which will take place partially or exclusively outside of California, is voluntary and is a privilege. I request that the student be allowed to participate in the out-of-state activity, under the supervision of the Supervising Teacher/Sponsor and adult chaperones. Transportation, lodging and out-of-state activity, activities will be explained before the Trip begins, with all such arrangements and activities deemed acceptable to me and the student.

The out-of-state activity may be cancelled by the district at any time, for any good faith reason, specifically including the inability of one or more students to participate due to insufficient funds to pay for the costs of the out-of-state activity, before the Trip commences. The Trip may also be interrupted or terminated once it has begun due to unplanned or unforeseen circumstances. There is no recourse or right of action against Tracy Unified School District, its Directors, Officers, teachers, chaperones, or agents as a result of such cancellation, interruption or early termination, with such issues determined in the sole and exclusive discretion of the district, or, once the Trip has begun, the Supervising Teacher or the District.

I authorize my student to be transported out of the state of California. Transportation may include (depending on the out-of-state activity and circumstances) commercial airplanes, busses, subways, taxis, trains, boats, ferries, vans, or other vehicles which do not meet federal, state, local, or District's safety standards or requirements, and over which the district has no direct right of control. No warranty or guaranty of safety or suitability exists regarding such transportation.

The Student is required to obey all rules and safety requirements of the Field Trip, all District and School Codes of Conduct, all laws of the State of California (even though the Field Trip will take place outside of this State), and all laws of any other State or Country in which the Field Trip will take place. The Student will always conduct himself/herself with the utmost respect for all persons, entities, and their property. The Student has the duty to take all reasonable and appropriate steps to protect himself/herself from actual or potential harm, and shall take no action threatening his/her safety or the safety of others. The Student must immediately advise the Supervising Teacher, or an adult chaperone, of any fact, circumstance or situation that may present a potential risk of harm or injury to the Student or any other participant on the Trip.

Because the laws of California and applicable Codes of Conduct will still govern the Student's

actions, the Student shall not engage in any activity even if the laws of another state or country would otherwise allow the Student to engage in such activity. This would include, but in no manner be limited to, alcohol consumption or smoking.

I understand and agree that failure of the Student to follow these Field Trip rules and safety requirements may result in the Student being sent home from the Field Trip at an earlier than expected date. I will be responsible to ensure that the Student is timely picked up at the point of arrival (nearest airport, train station, bus terminal) at my expense, with Tracy Unified School District determining the most expeditious and appropriate method of returning the Student home in such circumstances. In addition to being returned home early, the Student may also be barred from future Field Trips and face other disciplinary measures.

This Field Trip is being conducted pursuant to California Education Code Section 35330, which states that: "All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion." By executing this Field Trip Authorization, I understand and agree that neither I, nor the Student or any other person (parent, guardian, trustee, heir, executor, administrator, assignee), can hold Tracy Unified School District, its officers, agents, employees, volunteers or chaperones liable for any actual or potential claim arising out of, or which is legally or factually in some manner connected with, the Student's participation in this Field Trip. This release of potential claims and waiver of rights is governed under California law, which shall be solely applicable to the interpretation and application of this Field Trip Authorization.

Emergency medical information regarding the Student is on file with Tracy Unified School District and is current. Any updates have been shared in this registration. If an injury or medical emergency occurs during this Field Trip, a Supervising Teacher or chaperone has my express permission to administrator or to authorize the administration of urgent or emergency care, including the transportation of the Student to an urgent care or emergency care provider, and to administer or authorize such other and further medical care, attention, medication (whether prescription or over-the counter) as may be medically authorized or prudent under the circumstances. In such circumstances, notice to me and/or the Emergency Contact of the injury or medical emergency may be delayed. Therefore, any reasonable or appropriate health care provider has my express authority to conduct diagnostic or anesthetic procedures, and/or to provide medical care or treatment (including surgery and the use of medications), as they may deem reasonable or necessary under all existing circumstances. All costs and expenses associated with such care are solely my responsibility.

Yes, I agree:

Print Name: _____

Signature: _____

Parent/Guardian - Signatory must be 18 years of age or older

Yes, I agree

Print Name: _____

Signature: _____

Student