## Notus School District No. 135 -INSTRUCTION

2550F2

Trip Purpose:			
	Dates:		
Student Name:	Birthdate:	Grade:	
Address:	City, State & Zip:		
Cell Phone #:	Email:		
Parent(s)/Legal Guardian(s)			
Name:	Phone #:	□Home □Cell	
Email:	Phone #:	□Home □Cell	
Name:	Phone #:		
Email:	Phone #:	□Home □Cell	
<b>Emergency Contact</b> Please give t reached in an emergency	he name and phone number of a relative or frie	end who can be contacted if you canno	
Name:	Phone #:	□Home □Cell	
Relationship:	Phone #:	□Home □Cell	
Medications (if any):			
Allergies (if any):			
Medical Conditions:			
Insurance Provider:	Policy Number:		

The above-named student and the student's parents/legal guardians hereby request permission for the student to participate in the above-named trip/activity. In consideration for the student being given permission to participate in the trip/activity, the student and the student's parents/legal guardians hereby acknowledge and agree to the terms and conditions set forth below:

- Student Conduct Student understands that all rules, regulations and policies of the School and the team will be in effect at all times during the trip/activity and the Student agrees to abide by all such rules, regulations and policies. Student further understands that the school and Field Trip Organizer have the authority to establish additional rules of conduct necessary for the safe operation of the activity/trip during the entire period of the activity/trip and the Student agrees to abide by such rules.
- 2. Student Participation Student and the parents/legal guardians of the Student acknowledges that the Student will be engaging in activities that involve risk of injury, which may result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, or the condition of the premises or any equipment used during the activity/trip. Student and the Student's parents/legal guardians acknowledge and understand that there may be other risks associated in participating with the activity/trip not known or reasonably foreseeable at this time
- 3. I give permission for the above-named student to participate in the above-stated activity/trip.
- 4. Release and Indemnification Student and parents/legal guardians of Student hereby agree to release, defend, indemnify, hold harmless the School District, its officers, directors, employees, agents, servants and representatives from any and all liability, loss, damages, claim, demand, cost or expense arising out of any action or conduct occurring while the student is participating in the activity/trip and/or while being transported to the activity/trip, whether caused by the Student, a third party, the facility and/or any other cause whatsoever.
- 5. I understand and consent to the fact that participation in this activity could include travel to and from the activity's location out of state and overnight lodging, sharing accommodations with teammates under the supervision of the staff and parent chaperones.
- 6. In the event of accident or illness, I authorize the staff and/or representatives to obtain necessary medical treatment for this student, and hereby release and hold harmless the District, its officers, directors, employees, agents, servants and representatives in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical costs and related bills that may be incurred on behalf of this student for any illness or injury that student may sustain during the activity and while traveling to and from the location of the activity.

The Student and the parent(s)/legal guardian(s) of the Student hereby acknowledge that they have carefully read this document and all other documents provided relating to this activity/trip, know and understand the contents of such. That they agree to abide by each of the terms and conditions stated herein and in any other document relating to this activity/trip, and that they have signed this document voluntarily and of their own free will.

Parent/Legal Guardian Signature:	
	_ Date:
Student Signature:	
	_ Date: