

South Whidbey School District Local Field Trip Form

Classroom Teacher: _____

I give permission for (student) _____ to go to the following locations:

Langley, Clinton and Freeland included but limited to: Ø South Whidbey Community Center

Ø Nature Trails Ø Historical Place Museum in Coupeville Ø Outdoor Classroom Ø School District campuses

Ø South Whidbey Parks and Recreation Ø Whidbey Children's Theatre Ø Whidbey Island Center for the Arts

Teachers are always present as well as parent and community volunteers. Prior to any field trip your child's classroom teacher will notify you and may request that you volunteer to assist. Please fill out a Washington State Patrol background check in order to volunteer. Transportation may be provided by walking, district bus, district van, transit or private vehicle.

Medical Information: The following special health problems should be noted and adequate precautions taken (list such items as unusually severe reactions to bee stings, other severe allergies, hemophilia, diabetes, heart disease).

The following medications, prescriptions or special diets are needed: _____

Medical Release: In the event of an accident or illness, I understand that reasonable effort will be made to contact the parent or guardian immediately. However, if I am not available, I authorize the school to secure emergency medical care as needed.

Name of doctor: _____ Phone # _____

Insurance carrier (if available): _____ Policy # _____

Although I understand that the school district will make reasonable effort to provide a safe environment, I'm fully aware of the special dangers and risks inherent in participating in the activities described. Being fully aware of the risks, I hereby give consent for (student) _____ to participate in the ongoing activities. I'm aware photos and recordings may be taken for educational purposes/shared per our district policy.

Parent or Guardian Name (PRINT): _____

Parent or Guardian Signature: _____

Home # _____ Work # _____ Cell # _____

Date: _____ (effective current school year only)

Emergency Contacts and Phone #s

1. _____

2. _____