

## Field Trip Information Form

*To be completed by school personnel*

<b>School:</b>	<b>Teacher/Homeroom:</b>
<b>Field Trip Date:</b>	<b>Form Due Date:</b>
<b>Destination Name:</b>	<b>Transportation</b> (check all that apply): <input type="checkbox"/> Provided
<b>Time of Departure:</b>	<input type="checkbox"/> Not provided, parent/guardian to make own transportation arrangements
<b>Time of Return:</b>	<input type="checkbox"/> Other:
<b>Purpose:</b>	
<b>Activities</b> (attach detailed itinerary including lodging information):	
<b>Inherent risks of field trips and activities (check all that apply):</b> <input type="checkbox"/> <u>Water activities</u> : This field trip includes water activities (e.g., swimming, boating, ferries, water parks, beaches, piers) with inherent risks including but not limited to drowning, hypothermia, hyperthermia, and waterborne illness. <input type="checkbox"/> <u>Animal activities</u> : This field trip involves animal activities such as (petting zoo, barn, aquarium, zoo, agriculture, wildlife encounters, etc.) with inherent risks including but not limited to exposure to disease-carrying animals or insects resulting in zoonotic disease (such as campylobacter, salmonella, e. coli, influenza, and other possible infections), allergic reaction, bites, stings, and scratches. <input type="checkbox"/> <u>Wilderness/outdoor activities</u> : This field trip involves wilderness/outdoor activities such as (outdoor education, hiking, remote setting, local/state/national park, etc.) that have certain inherent risks including but not limited to inclement or extreme weather, hazardous terrain, remote locations, limited cell access, slips/falls, heat-related illness, and exposure to wildlife or insects. <input type="checkbox"/> <u>Physical activities</u> : This field trip involves physical activities such as (sports, non-WIAA sports, ropes/challenge courses, strenuous activity, etc.) that have certain inherent risks including but not limited to slips, trips, and falls, concussion/head injury, cardiac arrest, equipment failure, dehydration, sprains, fractures, confusions, and abrasions. <input type="checkbox"/> <u>Food/beverages</u> : This field trip involves the consumption of food and beverages that have certain inherent risks including but not limited to food-borne illness, gastritis, contamination or cross-contamination, and allergic reaction. <input type="checkbox"/> <u>Overnight field trip</u> : This field trip involves overnight activities that have certain inherent risks including but not limited to travel risks, third party lodging or accommodation, and risks associated with periods of unsupervised activity. <input type="checkbox"/> <u>Other</u> : List other risks:	

## Student Field Trip Information Form/Consent Agreement

*To be completed by parent/guardian*

**Student Name:**

**Student Date of Birth:**

**Parent/Guardian Information:**

Printed Name:

Phone number:

**Emergency/Alternate Contact:**

Printed Name and Relationship:

Phone number:

**Health Information (check all that apply):**

- My child has no known health concerns.
- My child currently has a health care plan/emergency plan on file in the School Health Room.
- My child has medication at school.
  - Medication taken every day at school.
  - Medication taken only as needed for symptoms/emergency.
- I plan to attend the field trip as a chaperone and will carry and administer my child's medication(s).
- List any additional medical/health information staff should be aware of:**

- All medication needed during the field trip must have current signed orders from a licensed medical professional on file in the School Health Room. Teaching staff will be trained by the building nurse to give medications during the field trip.
- Students who have permission to self-carry their medication(s) (per Board Policy #3419) will need to have their medication(s) with them for the field trip. They will be required to check in with the School Health Room prior to loading the bus. If they do not have their medications with them, they will not be allowed to participate in the field trip.

**Acknowledgement and Assumption of Risk:**

Participation in this field trip is optional. The activities and potential risks have been reviewed and understood. As events occur off school property, the district and staff are not liable for non-school locations. Some risks are inherent and cannot be eliminated.

I acknowledge that participation in this field trip involves inherent risks, both known and unknown, foreseeable and unforeseeable. These include risks related to travel, events, and activities outlined in this consent form and any attachments. Such risks may result in personal, physical, or emotional injury, paralysis, death, or damage to property or others.

**Medical Authorization:**

I certify that the above-named student has no medical or physical conditions that could interfere with his/her safety in participating in this field trip. I certify that I have disclosed any pertinent health concerns, medication information, or allergy information above.

I authorize qualified emergency medical professionals to examine and in the event of injury or serious illness, administer emergency care to the above-named student. I understand every effort will be made to contact me to explain the nature of the problem prior to any treatment.

If emergency care is needed, the district and staff-in-charge are not financially liable for any medical or related expenses resulting from accident, injury, illness, or unforeseen circumstances.

**Consent, Agreement, and Authorization to Participate:**

I certify that I am the parent or legal guardian of the student named above. I have reviewed and accept the Consent Agreement, including the acknowledgment and assumption of risk and the medical authorization, and hereby grant permission for the student to participate in all aspects of the field trip.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**