



Alamance-Burlington School System

1712 Vaughn Road, Burlington, North Carolina 27217

(336) 570-6060 Fax (336) 570-6540

www.abss.k12.nc.us

PERMISSION TO PARTICIPATE IN FIELD TRIP

Re: _____ School: _____
(Student's Name)

1. TRIP OR ACTIVITY PLANNED:

- a. Description of trip: _____
- b. Date/Time/Location of Departure: _____
- c. Date/Time/Location of Return: _____
- d. Mode of Transportation: _____
- e. Total Student Cost: _____

2. SUPERVISION: (Describe the supervision to be provided throughout the trip)

3. TRANSPORTATION: (Describe the transportation to be used for students)

4. REQUIREMENTS: (Describe any special requirements which are imposed on students who participate, including bringing certain items on the trip. e.g. life jacket)

5. EXPECTATIONS AND INSTRUCTIONS: I understand the student is expected, and the student has been instructed by me.

- A. To follow instructions given by supervisors.
- B. Not to leave or separate from the group without appropriate authorization from a supervisor.
- C. To comply with all laws and ordinances, including but not limited to those pertaining to prohibiting the possession or use of drugs or alcohol. **POSSESSION OR USE OF DRUGS OR ALCOHOL IS ABSOLUTELY PROHIBITED.**
- D. Not to enter the lodging accommodations of any other student unless with the permission of the occupants and only if of the same sex.
- E. To follow all school rules although away from school as they are considered applicable during the trip.
- F. To confirm with usual and customary standards of good citizenship, good decorum, and common courtesy.
- G. Describe other expectations and instructions. If there are unique dangers, mention the dangers.

In the event of any of the above expectations or instructions are violated, the student's participation may be immediately terminated, a parent or guardian may be called to retrieve the student, and disciplinary action may be imposed.

6. INSURANCE: I understand that the Board of Education does not or may not carry any insurance relative to the trip or for injuries to the student. I represent that the student has insurance either through the Board's student insurance program or through my own insurance carrier.
7. ACCOMMODATIONS: If the student is disabled or requires special accommodations, information concerning those accommodations is attached.
8. The school does its best to calculate field trip expense to its actual cost. Any overage of funds will be transferred to an account to help cover students who are not financially able to pay for a trip or to help reduce cost of a future trip.

I request that the above-named student be allowed to participate in the trip planned and specifically consent to the student's participation.

If any emergency medical procedures or treatment are required during the trip, I consent to the trip supervisors taking, arranging for, and consenting to the procedures or treatment in the supervisor's discretion. I will pay the costs of any such medical procedures or treatment.

To the maximum extent permitted by law, I release and waive, and further agree to indemnify, hold harmless or reimburse Alamance-Burlington School System Board of Education, the individual members, agents, employees and representatives thereof, as well as trip supervisors, from and against any claim in which I, any other parent or guardian, and sibling, the student, or any other person, firm, or corporation may have or claim to have, known or unknown, directly or indirectly, any losses, damages, or injuries arising out of, during, or in connection with the student's participation in the field trip and related activities or the rendering of emergency medical procedures or treatment if any. If the student is at least 18 years of age, he or she shall signify acceptance of and agreement to all the above conditions and releases by signing where indicated below.

Date: _____

Parent/Guardian: _____

Student (if at least 18 years of age): _____

Address: _____

Telephone: _____

Emergency Telephone: _____