

Parent Permission to Attend a School Sponsored Activity and Consent to Medical Treatment

(Name of Student) _____ has the opportunity to participate in a school activity away from school premises. If you approve the following arrangement, please sign at the bottom of this section and return to the faculty sponsor.

NATURE OF ACTIVITY: Choir Performances and Festivals

DESTINATION: Various locations - See Performance Calendar

DATE: See Performance Calendar

TIME AND PLACE OF DEPARTURE: See Performance Calendar

TRIP SUPERVISORS: Linda Heikkila and various approved chaperones

MEANS OF TRANSPORTATION: District transportation (bus, van), Chartered Bus, Teacher/Parent Vehicle

I understand the nature of the school activity in which my son/daughter will be participating and that he/she is expected to abide by all school regulations during the course of the activity.

I understand that the district is liable or responsible for the conduct or safety of my son/daughter only while he/she is or should be under the immediate and direct supervision of an employee of the district.

I hereby give my permission for him/her to participate in the above-described activity.

I further agree that, in the event of an accident, illness or any other circumstance requiring medical treatment, such treatment may be procured for my son/daughter by the trip supervisors or authorized chaperones without financial obligation to the district.

Date: _____ Signature of Parent/Guardian _____

IMPORTANT MEDICAL INFORMATION THE SUPERVISOR SHOULD KNOW:

ALL EMERGENCY CONTACT INFORMATION (home phone / cell phone(s) / alternate contacts):

THIS FORM WILL BE KEPT BY THE CHAPERONE DURING THE ACTIVITY

(Please complete the form below)

AUTHORIZATION TO TREAT A MINOR

I (We), the undersigned parent, parents or legal guardian of (*name of student*) _____, a minor, do hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis and treatment and emergency hospital care which is deemed advisable and is to be rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

Date: _____ Signature of Father and/or Mother, or Guardian: _____

Medications the student will have with them

Allergies to Drugs or Foods

PLEASE COMPLETE AND SIGN BOTH THE TOP AND BOTTOM OF THIS FORM

By signing this form, you are also acknowledging that you will encourage the student to follow all school rules and the rules established for the trip as established by the supervisor.. Failure to adhere to the rules could result in the parent/guardian being required to arrange transportation home for the student with further consequences as determined by the director and/or school administration. Signing this form also gives your student permission to participate in all trip activities..

Travel Purpose:**Travel Dates:**

Student Name _____

Phone Number _____

1st Contact Guardian Name _____

Phone Number _____

Relationship _____

Alt Phone Number _____

2nd Contact Guardian Name _____

Phone Number _____

Relationship _____

Alt Phone Number _____

I have read and will abide by the definitions, principles and rules for overnight travel. I have reviewed these with my student/parent. I understand that if I break the rules or I know that rules were broken, I have a responsibility to report it to a chaperone or the trip leader.

I understand that breaking any part of this contract could result in

- A student being assigned as a “permanent buddy” to a chaperone.
- A student being dismissed from the trip (student/parent responsible for expenses)
- A student requiring their parent to chaperone any trip the student attends.
- A student not being allowed to travel.
- Other consequences as determined by the choral director, school and/or the school district

Student Signature _____

Parent Signature _____

Crimson Cliffs High School Choral and Vocal Music

Overnight Travel Contract

Each student traveling with the group must submit this signed document before they may travel. Most problems can be avoided by observing general principles and rules.

General Travel Principles

- 1) Students stay (generally) four to a room with two beds.
- 2) Adult chaperones attend the trip. Each student room is assigned an adult chaperone.
- 3) **Students are never to be alone during a trip.** Students should travel in groups and be careful that all in the group are safe.
- 4) Care is given to stay in hotels that are safe, have a free hot breakfast, and can accommodate the needs of our group. Hotel contact information is given on the Travel Itinerary.
- 5) At any time, a parent can call or text the trip leader for information about itinerary details and/or questions or concerns about students. Contact information will be given on the Travel Itinerary.
- 6) Students will be given verbal instructions regarding the itinerary periodically during the trip. Each student is responsible to listen carefully, plan and follow the instructions given.
- 7) **Students should avoid “Public Displays of Affection” (PDA) during a trip (regardless of the personal relationships the students have outside of class).** During the trip, each student is expected to conduct themselves with dignity and respect. This includes, and is not limited to, back-rubs, hand-holding, cuddling, etc. This applies while on the bus, during the activity and at the hotel (all times during the trip).
- 8) On occasion students are asked if they have a preference of one person they would choose to room with and one person they would choose not to room with. Not all students will be assigned according to their requests. Students will be assigned to rooms that provide the safest and most responsible opportunities.
- 9) There is not a “travel fund” set up at the school for Choral and Vocal Music. Each trip is assessed a Trip Fee to cover transportation, lodging, occasional meals and any group activities. Generally students cover their meal expenses or bring food with them during the trip.

Hotel Rules

- 1) **No students are allowed to be in any other student rooms, for any reason, unless the student has been cleared, in person, with their assigned chaperone or the trip leader.**
- 2) **No students may be out of their rooms for any reason after “in-room” time, unless the student has made clear contact with their assigned chaperone.**
- 3) **Students must observe the “lights-out” time in their room.**
- 4) **Hotel quiet times are to be strictly observed.**
- 5) If hotel rules or travel principles are broken, students have a responsibility to inform a chaperone or travel leader as quickly as possible.
- 6) Any consequences imposed for breaking rules will apply to those who break rules as well as students who were aware of the breaking of rules and did not talk to a chaperone about it.

Definitions

In-Room Time This is the time that students must be in their respective rooms (for the evening). Every student assigned to the room must be in the room. At some point between the “in-room” time and “lights

out,” the assigned chaperone(s) will make a room check. In-room time applies through the night until normal breakfast times in the morning.

Room Check The assigned chaperone(s) will personally check each room at the “in-room” time. Chaperones are instructed that they may 1) talk at the door to a student representing the room, 2) ask to see each person in the room or 3) walk into the room and physically account for each person. Instructions may be given at this time about the activities in the morning.

Lights Out At the “lights-out” time, lights should be turned off, phone alerts should be silenced, and each person should allow others in the room to sleep. Regardless of the “room decision” to stay up longer, this is now quiet time students should be going to sleep.

Itinerary

Dress

Food

Packing List