

PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISK FOR FIELD TRIP

(This form and an attached itinerary description are required for all field trips.)

IMPORTANT DIRECTIONS: (1) Use one form per trip, (2) Complete the school portion (top half) of form, (3) Duplicate one form

per student, and (4) Send a copy home for parent and student signatures.

Date(s) of Trip		Destination	
Feb. 1, 2018 - May 31, 2018		To/From/At Sandy Run Regional Park	
Purpose		·	
Crew practice SUPERVISION (Check o	ne.)		
	tly supervised by adults on this trip at a	ll times	
	supervised by adults on this trip with the		tudents will be supervised at Sandy
	t be supervised during transportatio		· · · · · · · · · · · · · · · · · · ·
other than by driver.			
TRANSPORTATION B	EING PROVIDED (Check all that appl	y.)	
U Walking	School Bus	Commercial Carrier	Personal Vehicle
Leased Vehicle	County Vehicle	None	
DRIVERS OF PRIVAT	E OR LEASED VEHICLES (Check a	ll that apply.)	
✓ Student	✓ Parent	Teacher or Staff Member	r 🗹 Other Adult
VEHICLE TYPE (Check	x all that apply.)		
✓ Car	✓ Van (10 passenger or less)	✓ SUV	✓ Other Bus (Specify)
	(all that apply.)		
RISK RELATED (Check	(un that apply.)		✓ Other rowing on river
RISK RELATED (Check	Amusement or Theme Park	Beach or Ocean	(List activity)
Swimming Pool	Amusement or Theme Park		(List activity)
Swimming Pool	E (Check one) Will be available on t	his trip <u>Will not</u> be avail	(List activity)
Swimming Pool	_	his trip <u>Will not</u> be avail g reement	<i>(List activity)</i>
Swimming Pool STOCK EPINEPHRINI	E (Check one) Will be available on t	his trip <u>Will not</u> be avail g reement	<i>(List activity)</i>
Swimming Pool STOCK EPINEPHRINI While participating in this at all times. Signature of Student I understand that participa understand that the trip ma risk of injury or even deat of the trip to the extent index	E (Check one) Will be available on t Pupil Ag s trip, I will accept responsibility for ma PARENTAL AUTHORIZATION AN tion in this trip is voluntary, that it is no ay include amusement activities and tha h. I have read and understand the the in dicated by my signature below. I also u er the Fairfax County School Board, or	his trip <u>Will not</u> be avail greement intaining good conduct and ap DACKNOWLEDGEMEN ot required, and that it exposes at participation in any amusem inerary and authorize my chile nderstand that participation in	(List activity) lable on this trip opearance, and I will follow directions Date T OF RISKS is my child to some risk(s). I also nent activities will expose my child to some d to participate in the planned components in the trip will involve activities off school
Swimming Pool STOCK EPINEPHRINI While participating in this at all times. Signature of Student I understand that participa understand that the trip ma risk of injury or even deat of the trip to the extent ino property; therefore, neither	E (Check one) Will be available on t Pupil Ag s trip, I will accept responsibility for ma PARENTAL AUTHORIZATION AN tion in this trip is voluntary, that it is ne ay include amusement activities and the h. I have read and understand the the it dicated by my signature below. I also u or the Fairfax County School Board, or a roperty.	his trip <u>Will not</u> be avail greement intaining good conduct and ap DACKNOWLEDGEMEN ot required, and that it exposes at participation in any amusem inerary and authorize my chile nderstand that participation in	(List activity) lable on this trip opearance, and I will follow directions Date T OF RISKS is my child to some risk(s). I also nent activities will expose my child to some d to participate in the planned components
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up or pays for the trip.