



# 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.

TO BE COMPLETED BY THE SCHOOL

Date(s) of Trip March 7, 2022-May 20, 2022	Destination Sandy Run Regional Park, VA; Mathews, VA, Philadelphia, PA
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Purpose  
To attend rowing practices and regattas

**SUPERVISION** (Check one.)

Students will be directly supervised by adults on this trip at all times

Students will be directly supervised by adults on this trip with the following exceptions walking to and from practices and regattas and parking lots, as well as between events

**TRANSPORTATION BEING PROVIDED** (Check all that apply.)

Walking       School Bus       Commercial Carrier       Personal Vehicle

Leased Vehicle       County Vehicle       None

**DRIVERS OF PRIVATE OR LEASED VEHICLES** (Check all that apply.)

Student       Parent       Teacher or Staff Member       Other Adult

**VEHICLE TYPE** (Check all that apply.)

Car       Van (10 passenger or less)       SUV       Other BUS  
*(Specify)*

**RISK RELATED** (Check all that apply.)

Swimming Pool       Amusement or Theme Park       Beach or Ocean       Other ROWING/WATER  
*(List activity)*

**STOCK EPINEPHRINE** (Check one)  Will be available on this trip     Will not be available on this trip

TO BE COMPLETED AT HOME

### Pupil Agreement

While participating in this trip, I will accept responsibility for maintaining good conduct and appearance, and I will follow directions at all times.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

### PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISKS

I understand that participation in this trip is voluntary, that it is not required, and that it exposes my child to some risk(s). I also understand that the trip may include amusement activities and that participation in any amusement activities will expose my child to some risk of injury or even death. I have read and understand the the itinerary and authorize my child to participate in the planned components of the trip to the extent indicated by my signature below. I also understand that participation in the trip will involve activities off school property; therefore, neither the Fairfax County School Board, or its employees and volunteers, will have any responsibility for the condition or use of any nonschool property.

### PARENT PERMISSION

 (Check all that apply.)

- Participation in all aspects of this trip.
- Participation in all aspects of this trip, except the amusement and theme park activities.
- Participation in all aspects of this trip, except the water-related activities.
- Other \_\_\_\_\_

I give permission for \_\_\_\_\_ to participate in this field trip.

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT NOTICE** Fairfax County Public Schools (FCPS) cannot be responsible for reimbursements to parents or students of money submitted as advance payment (e.g., for Broadway shows, transportation, or hotels) for any trip that FCPS cancels. It is strongly recommended that you personally review any tour company's or commercial carrier's contract, including its stated refund policies, BEFORE your child signs up or pays for the trip.