

**DOUGLAS COUNTY SCHOOL DISTRICT**  
**FIELD TRIP PERMISSION FORM**

Parent/Guardian of: \_\_\_\_\_ Please return by: \_\_\_\_\_

Trip to: \_\_\_\_\_ Date(s): \_\_\_\_\_ Fee: \_\_\_\_\_

Comments: \_\_\_\_\_

Because this activity will take place away from your child's school, there are some special considerations and procedures which apply. We have outlined these below:

Your child's participation in this special activity is voluntary. Your written consent at the bottom of this form is necessary for your child to participate.

Participation in activities away from school may potentially involve risks and responsibilities for you and your child that are beyond the scope of those normally associated with traditional school functions under our supervision. These may include, for example, personal injury or damage to personal property. We encourage you to inquire in advance concerning the nature and details of each field trip and of any potential risks which will be assumed through participation. By signing below, you acknowledge that you have made yourself aware of any potential risk associated with the field trip and that you voluntarily and knowingly assume all such risk.

The School District's responsibility for injuries to students, or damage to their property in connection with these activities is defined by Colorado law. Generally, the District has immunity from most claims, such as those resulting from the general supervision of students.

The School District does not have any medical/dental/hospitalization insurance covering students for injuries incurred at school or while on field trips. If you have not already done so you should investigate and must obtain medical insurance coverage for your child.

If your child fails to abide by District rules of conduct and teacher instructions during the trip, it may become necessary to discontinue his/her participation in the activity. In that case, you may be responsible for picking up your child immediately.

I hereby give my permission for my student to attend the above referenced field-trip. I give permission for my child to be transported to and from the trip destination via district authorized vehicles, including vehicles operated by district approved charter companies. I hereby release and hold harmless the District, its director, Board Members, officers, agents, employees, teachers and authorized volunteers from any and all liability, liens, claims, demands, actions or cases of action, whatsoever arising from my student's participation in the above reference field trip.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**MEDICAL EMERGENCY/CONSENT FOR FIELD TRIP**

I, \_\_\_\_\_, being the parent or legal guardian of \_\_\_\_\_, give my consent for emergency medical and surgical treatment in a licensed medical facility by a licensed physician should my child's condition require it in my absence. I understand that in such a case, reasonable attempts would first be made to contact me, time and conditions permitting.

I confirm to the Douglas County School District that my child is in good health and that his/her participation does not pose a hazard to his/her health or that of participating students.

As long as the medical or surgical treatment considered necessary in the situation is in accordance with generally accepted standards of medical practice for the particular type of injury or illness involved, I impose no specific prohibitions regarding treatment unless stated here:

\_\_\_\_\_

My student has the following medical condition(s), which may require emergency care (include allergies):

\_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

**EMERGENCY CONTACTS FOR DAY(S) OF FIELD TRIP**

Parent/Guardian \_\_\_\_\_ Work # \_\_\_\_\_ Home # \_\_\_\_\_

Parent/Guardian Cell # \_\_\_\_\_ Parent/Guardian Cell # \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Work # \_\_\_\_\_ Home # \_\_\_\_\_



**DOUGLAS COUNTY SCHOOL DISTRICT RE-1**  
**Transportation Awareness**  
**Consent and Release**

STUDENT NAME: \_\_\_\_\_  
(Please Print) Grade \_\_\_\_\_

The Douglas County School District (the "District") provides District transportation for students to and from a great many activities, events, matches and games. However, the District is unable to provide District transportation in all circumstances and to all events. When District transportation is not available, it is the student's parent's/guardian's responsibility to provide or arrange for their student's transportation to and from the event.

When District transportation is not available and other alternative forms of transportation are utilized, the District cannot and does not assume any responsibility for the safety, training of drivers, condition of vehicles, adequacy for the use or purpose intended or any other matters related to any non-District transportation.

Therefore, we, the undersigned parent/guardian and student, hereby acknowledge, agree and understand that the District does not insure, endorse, approve or sponsor any form of non-District transportation, whether by parents, students or otherwise, to and from District off-campus activities or events. We further acknowledge it is our responsibility to provide or arrange for our/my child's transportation to District events when District transportation is not available. As such we consent to our child's use of alternative means of transportation, including private vehicles and, if applicable, consent to our child's use of a vehicle to transport himself/herself to off-campus events. We hereby waive, release, discharge and agree to hold harmless and indemnify the District, its agents, employees, insurers and Board of Education, from any claim, cause of action, damage, injury, or demand of any nature, including bodily injury, property damage or death, arising from or sustained during or as a result of my/our child's utilization of or participation in any non-District transportation, whether furnished by us, our student, parent or otherwise.

Parent/Guardian Signature	Date
Student Signature	Date

# ThunderRidge High School Parent Authorization For Student To Drive Privately Owned Vehicle

Dear Parent:

Your student, because of a hardship or conflict, has requested permission to drive him/herself to and from a school sponsored activity. ThunderRidge High School may find the request acceptable, if the student and parents/guardian agree to the following:

- The student's participation in this activity is voluntary.
- The vehicle to be driven by the student is in safe working order and is titled to the student or parent/guardian.
- The parent/guardian has and accepts full responsibility for auto insurance on the vehicle to be driven by the student. The School District recommends \$300,000 single limit or \$100,000/\$300,000/\$25,000 automobile insurance.
- The student will not have any passengers while driving to and from the activity.
- Participation in activities away from school may potentially involve risks and responsibilities for you and your student that are beyond the scope of those normally associated with traditional school functions under our supervision. These may include, for example, personal injury or damages to personal property. We encourage you to inquire in advance concerning the nature and details of each field trip and of any potential risks, which will be assumed through participation.
- If your student fails to abide by District rules of conduct and teacher instructions during the trip, it may become necessary to discontinue his/her participation in the activity. In that case, you may be responsible for picking up your student immediately.

## RELEASE:

I exempt and release the School District, its directors, employees, and agents from any and all liability, claims, or causes of action, whatsoever arising out of any damage, loss, injury, or death irrespective of causes, unless caused by the negligence or misconduct of the School District, its agents, or employees.

I understand that all potential losses, damages, or injuries are not known and cannot be determined as of the date of this Agreement, but it is my express intent that this Release apply to any and all such unknown damages, loss, or injury.

Activity: \_\_\_\_\_

Teacher: \_\_\_\_\_

Trip: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Subject: \_\_\_\_\_

Fee: \_\_\_\_\_

I/we have read and understand the above instructions and information concerning field trips, and hereby give my/our consent to participate in and drive to this activity

\_\_\_\_\_  
Parent/Guardian's Signature                      Date

\_\_\_\_\_  
Student's Signature                                              Date