



**GROSSMONT UNION HIGH SCHOOL DISTRICT**  
**STUDENT ACTIVITY CONSENT FORM**  
(Student Field Trip and Travel)

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**To be completed by school:**

School Name: El Capitan High School Supervising Faculty: Dyer, Meade, Meade, Muniz  
Activity & Location: Welcome back Picnic - El Monte Park area #4  
Depart from: \_\_\_\_\_ Time: 10:00 am Date: 8-20-22  
Return to: \_\_\_\_\_ Time: 1:00 pm Date: 8-20-22

The above described activity is voluntary. All school policies and regulations are in effect during activity/excursion. **Students who violate school policies and regulation are subject to disciplinary action upon return from the activity/excursion.** Students apprehended by law enforcement will be left in the custody of the local authorities; parents will be responsible for release of their student.

**PARENT/GUARDIAN REQUEST FOR STUDENT PARTICIPATION**

I, the undersigned, request that my student, \_\_\_\_\_, be permitted to participate in the above-described activity. I understand that there are risks associated with participation. Pursuant to Education Code § 35330, any person making a field trip or excursion waives all claims against the District and the State of California for injury, accident, illness or death occurring during or by reason of the field trip or excursion or any unforeseen occurrence. Understanding that participation is voluntary, I HEREBY WAIVE ALL CLAIMS which I or my student may have against the state of California, the school district, its Governing Board, and its officers, agents, and employees for any injury, accident, illness or death occurring during, connected with, or by reason of the above-described activity. I understand that by signing this document, I am giving up substantial rights, and I assume all risks of signing it, and do so voluntarily.

**TRANSPORTATION ARRANGEMENTS**

Transportation ~~will~~ / **will not** be provided by the District for the above-described activity. For activities where transportation is not provided by the District:

☒ Parent/Guardian agrees to transport student to the above described event.

☒ Parent/Guardian authorizes student to be transported by a volunteer adult driver. *All volunteer drivers are required to file signed verification of minimum insurance requirements with the school in accordance with District policy.*

I, the undersigned, understand the above described transportation arrangements. I further acknowledge that no District supervision will be provided during transport by volunteer adult drivers.

**MEDICAL CONSENT AND MEDICAL RELEASE OF RESPONSIBILITY/LIABILITY**

Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**Required for Overnight / Long-Distance Travel**

Student's Primary Care Physician : \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
Student's Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

I hereby give my consent to the District and its representatives to obtain whatever emergency medical treatment deemed necessary for my student in the event that my student becomes ill or is injured during the activity. The school representative is authorized and has my consent to obtain X-rays, examinations, anesthetics, medical or surgical diagnoses or treatment and hospital care which is deemed advisable by, and rendered under the general supervision of a licensed physician. Further, I release the District from any responsibility for medical expenses which may be incurred as a result of my student's participation in this voluntary activity.

\_\_\_\_\_  
(Print Name of Parent/Guardian) (Signature of Parent/Guardian) Date: \_\_\_\_\_

Administration Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Student's Name:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_

**Cost of Trip:** \$3.00 for parking

**Items Required For Trip:** Permission Slip, food item to share for lunch at the picnic. Families are encouraged to attend.

**Needs a ride**   YES/NO  

**Additional Travel Details:**

The FFA chapter will provide hot dogs and ice water. Please bring something to share as a potluck item for the picnic. We will not be able to provide transportation for everyone to this event. If students can get a ride there and back that will be a big help. If your student needs a ride, please indicate on the permission slip and tell the teacher when it is turned in. There will be games to play and time to hang out and meet FFA members and their families. Look forward to seeing you there.