



**PALO VERDE UNIFIED SCHOOL DISTRICT  
FIELD TRIP PERMISSION SLIP  
AND  
WAIVER OF CLAIM**

Education Code section 35330 authorizes the governing board of any school district to conduct field trips or excursions for students in connection with course instruction or school related social, educational, cultural, athletic or school band activities to and from places in the state, out-of-state, the District of Columbia or a foreign country. Field trips or excursions, which may include overnight travel, may be connected with such courses and instruction or such school activities that further the student's education. Participation in this trip is optional and **voluntary**. Attendance by your student is not required. Such trips are under the direct supervision of at least one teacher and/or school administrator, or certificated athletic coach in the case that a same day high school athletic event and precautions are taken to ensure each student's welfare.

I hereby grant permission for my son/daughter/ward \_\_\_\_\_  
(Name of Student)  
to participate in a field trip to

(place(s)/activity or activities/event(s))

The planned field trip is scheduled to leave from \_\_\_\_\_  
(school/site)  
at \_\_\_\_\_ on \_\_\_\_\_ and return to \_\_\_\_\_ at \_\_\_\_\_  
(time) (date) (school/site)  
approximately \_\_\_\_\_ on \_\_\_\_\_ .  
(time) (date)

The field trip will involve the following (*Teacher: describe in detail, indicating approximate times, names and addresses of locations. A separate document may be attached to this form to outline the trip details and itinerary*):

Class/Group Attending: \_\_\_\_\_ No. of students \_\_\_\_\_  
Names of teacher(s), administrator(s), coach(s), chaperone(s):

Mode(s) of Transportation (*Teacher: list in detail transportation mode and detailed routes for each segment of the field trip*):

If traveling by automobile, name(s) of approved driver(s):

If traveling by private plane, name(s) of approved pilot(s)

Specify anything the student needs to bring:

1. I understand this field trip is optional and voluntary and that attendance by my student is not required and that an alternative activity at school will be provided if I do not give permission for my student to participate.
2. I understand that all students going on this trip will be responsible in conduct to the bus driver(s), teacher(s), chaperone(s), pilot(s) and, if applicable, adult sponsors, at all times. I understand that my student is to abide by all rules and regulations governing conduct during the trip. Any violation of these rules and regulations may result in a student being sent home at the expense of his/her and/or parent/guardian.
3. I understand that students are required to go and return from this event on the transportation provided and that all field trips will begin and end at the school.
4. I hereby acknowledge that I am fully aware of the risks and hazards that may arise from my student's participation in the above referenced field trip or excursion and hereby elect voluntarily to allow my student to participate in the field trip or excursion, with full knowledge of the risks inherent.
5. The District provides all students with Field Trip Accident Insurance that covers 100 percent of reasonable and customary charges up to \$1,000,000.00 per claim, with no deductible amount. I understand that in order to make an insurance claim, I must complete, or cooperate with school personnel and the attending physician or dentist in completing an accident claim form, which is available at the school. I shall submit the claim form according to the instructions on the form. I understand that the District provides this insurance as a courtesy and, in no way, is responsible for making, granting, or denying of insurance claims.
6. **WAIVER OF CLAIM** –We, the undersigned student and parent or legal guardian of the above named student, understand that California Education Code Section 35330 (d) provides that all persons participating in a field trip or excursion shall be deemed to have waived all claims against the District or the State of California for injury, illness or death occurring during or by reason of the field trip or excursion. We agree, as a condition of the student participating in said activity, to hold harmless and waive any and all claims against the school, its employees and volunteers, the Palo Verde Unified School District, its governing board, the individual members thereof, and all other District officers, agents and employees, including, but not limited to, claims arising out of any negligence of any of the officers or employees of the District, for any harm, accident, illness, injury or death or any loss or damage to personal property occurring during or by reason of his/her participation in said field trip or excursion.
7. We agree to indemnify and hold the Palo Verde Unified School District, its officials, employees, and the Palo Verde Unified School District Board of

**Education, harmless from any and all liability that may arise in connection with the student's participation in this program. Our signatures on this form shall constitute an informed, voluntary and knowing waiver as required by law.**

We each have read and hereby certify that the above information is correct to the best of our knowledge. The signatures below authorize above named student to participate in the above described field trip and indicate that we each have read and understand the above **Waiver of Claim.**

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

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian (on behalf of self and student)

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (Please Print)

Phone: \_\_\_\_\_

Medical Insurance Carrier: \_\_\_\_\_

Policy Number \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_



## ADDITIONAL HIGH SCHOOL/MIDDLE SCHOOL PERMISSION

With the teacher's approval, a high/middle school student may wish to meet at and/or leave from the destination of his/her own. If this choice applies to the above named student and the parent/legal guardian approves, one of the options must be checked and student and parent/legal guardian must sign below, otherwise, he/she will leave and arrive with the supervising teacher. Under this option, Palo Verde Unified School District and the school will not be liable for any incidents that may occur.

My high school student will arrive at the destination on his/her own.

My high school student will leave the destination on his/her own.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Parent/Guardian Name (Please Print): \_\_\_\_\_