

SRVUSD STUDENT ACTIVITY/TRIP PERMISSION/EMERGENCY FORM **GRADE:**
2015-2016 San Ramon Valley High School

Student: _____ Parent/Guardian: _____

Home # _____ Work # _____ Cell # _____

Teacher's Name: Janet Willford (jwillford@srvhs.org)

I give my consent and permission for _____ to attend any and all activities below for which they are eligible. This permission slip shall serve for any and all of these events.

- Waterworld (Seniors only)
- All Dances @ SRVHS
- Junior Prom off site
- Sophomore Cruise off site
- Discovery Kingdom (Seniors only)
- Senior Ball off site
- PTSA Peres field trips/Richmond
- Dodgeball/kickball/lunch time inter-murals

TRANSPORTATION: Charter Bus OR Private Vehicle (volunteer drivers). If by private car, I understand that seat belts and/or seats are required by law to be worn/used by all passengers. I further understand that safety considerations and California State Law require that no child ride in the front passenger seat of my vehicle. I also understand that children MUST be secured in an appropriate passenger restraint system (safety seat or booster seat) until they reach six (6) years of age or weigh sixty (60) pounds.

INFORMATION: Education Code Section 35330 authorizes the governing board of any school district to conduct field trips or excursions for students in connection with courses of instruction of school related social, educational, cultural, athletic or school band activities to and from places in the state, any other state, the District of Columbia, or a foreign country. Field trips or excursions may be connected with such courses of instruction or such school activities that further the student's education and participation is voluntary. As a voluntary event, no special attendance credit is given for participation, and an alternative activity at school will be provided if my child does not participate.

PARENT/GUARDIAN TO COMPLETE EMERGENCY INFORMATION:

PLEASE CHECK THE APPROPRIATE STATEMENT REGARDING STUDENT'S HEALTH:

- My child has no known health problems.
- My child has the following health problems: _____

(Please identify any medication that the child may need during the course of this trip)

PLEASE CHECK #1 or #2 BELOW TO INDICATE DESIRED ACTION IN THE EVENT OF ACCIDENT OR EMERGENCY

1. In the event of accident or emergency, when a parent/guardian is unavailable, I hereby authorize a representative of the school to make such arrangements as he/she considers necessary for my child to receive medical/hospital care, including necessary transportation. Under such circumstances, I further authorize the physician named below to undertake such care and treatment of my child as he/she considers necessary. In the event said physician is not available at any time I authorize such care and treatment to be performed by any licensed physician or surgeon. **THE UNDERSIGNED PARENT/GUARDIAN FULLY UNDERSTANDS HE/SHE IS RESPONSIBLE TO PAY ALL COSTS INCURRED AS A RESULT OF THE FOREGOING.**

Physician's name _____ Phone # _____

Medical Insurance Name (Kaiser, etc.) _____ Medical # _____

2. I do not choose the above statement and desire the following action be taken: _____

WAIVER: California law provides as follows: "All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion" (Education Code Section 35330). I acknowledge that as a condition of my child's participation, I agree this waiver of all claims shall be extended to any and all claims against the school, its employees and volunteers, the district, its governing board, the individual members there, and all other district officers, agents and employees. Further, I agree to indemnify and hold harmless the school, its employees and volunteers, the district, its governing board, the individual members thereof, and all other district officers, agents and employees for any injury, harm, accident, illness, death, loss, liability, cost, expense or claim of any type whatsoever (including attorney's fees) or damage to personal property occurring during or by reason of this excursion/field trip event.

I understand that participation in this field trip involves a certain degree of risk. I have carefully considered the risk involved and consent for my child to participate in the field trip.

My signature below authorizes my child to participate in the field trip:

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

SRVUSD STUDENT ACTIVITY/TRIP CODE OF CONDUCT AGREEMENT GRADE: _____
2015-2016 San Ramon Valley High School

The success of school sponsored activities depends upon the conduct of all students who participate. Participation in a school activity is a privilege. It should be noted that attendance is voluntary, not mandatory, and, as such, the student agrees to abide by the rules and regulations or forfeit his/her privilege to participate in the trip. In order that everyone receives maximum benefit from their participation in this activity, the "Student Code of Conduct" must be adhered to at all times. There are standards for behavior that students are expected to uphold at all times. These include:

STUDENT INITIALS

- Respecting public and private property.
- Obeying all policies of the SRVUSD, school and organization in effect for the duration of the activity.
- Conducting oneself in a courteous and respectful manner at all times.
- Following directions and instructions of chaperones without fail.
- Refraining from bringing, consuming, or being in the presence of drugs, alcohol or tobacco. Understanding that choosing to bring, consume, or be in the presence of others who are consuming will lead to suspension and/or expulsion, as well as immediate termination of the activity privilege. Consequences will be applied regardless of whether the student has brought or consumed alcohol, tobacco or drugs, or has associated with, or is in the presence of others who are consuming drugs, alcohol or tobacco. **A Breathalyzer may be used at the discretion of the administration.**
- Adhering to the school dress code. NOTE: Students or guests will not be admitted if their attire is deemed revealing or inappropriate. The administrator in charge will determine what is appropriate. Attire that is too revealing in the front or back or exposes the midriff or sides is not appropriate. Dance dresses can be shown to administrators ahead of time if there are concerns.
- There are no refunds once a ticket for a dance or school activity is purchased.
- For all school dances, doors will be closed at 9:00 pm. (Students may be admitted after 9:00 pm with **prior** permission of the administrator in charge.
- There are no "in and out" privileges at dances. Once a student exits the dance, he/she will not be readmitted.
- For all school dances, students and guests must dance in a safe and appropriate manner. **Demearing or sexually explicit dancing, groping, fondling, bending over, lap dancing, floor break dancing, freak dancing and moshing are not acceptable and may result in the student being asked to leave or further disciplinary action.**
- Guests are only permitted at Prom and Ball, and only given the parameters below:
 - Guests must be accompanied by a SRVHS student.
 - SRVHS students and guests must show a current school I.D. card.**
 - SRV guests must have a **pre-approved guest pass** from the administration.
 - Only high school students will be admitted to Prom. Only students under 20 will be admitted to Ball.
 - Guests must obey all school rules.

I understand the behavior expectations and the consequences of violating the Student Code of Conduct. I have read this code and agree to comply with all of the rules and regulations as outlined by the staff supervisor.		
Student NAME	Student SIGNATURE	Date

I understand and support the behavior expectations and the consequences if my child violates the Student Code of Conduct. My child has read this code and will comply with all of the rules and regulations as outlined by the staff supervisor.		
Parent/Guardian NAME	Parent/Guardian SIGNATURE	Date

I understand and support the behavior expectations and the consequences if my child violates the Student Code of Conduct. My child has read this code and will comply with all of the rules and regulations as outlined by the staff supervisor.		
Parent/Guardian NAME	Parent/Guardian SIGNATURE	Date

