

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	Destination								
	Purpose									
	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 _____									

TRANSPORTATION BEING PROVIDED (Check all that apply.)										
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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 _____
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Participation in all aspects of this trip.		
Participation in all aspects of this trip, except the amusement and theme park activities.		
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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.		

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	Destination
	Purpose	
	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 _____ _____ _____	
TRANSPORTATION BEING PROVIDED (Check all that apply.)		
<div style="display: flex; justify-content: space-between;"> Walking School Bus Commercial Carrier Personal Vehicle </div> <div style="display: flex; justify-content: space-between;"> Leased Vehicle County Vehicle None </div>		
DRIVERS OF PRIVATE OR LEASED VEHICLES (Check all that apply.)		
<div style="display: flex; justify-content: space-between;"> Student Parent Teacher or Staff Member Other Adult </div>		
VEHICLE TYPE (Check all that apply.)		
<div style="display: flex; justify-content: space-between;"> Car Van (10 passenger or less) SUV Other _____ (Specify) </div>		
RISK RELATED (Check all that apply.)		
<div style="display: flex; justify-content: space-between;"> Swimming Pool Amusement or Theme Park Beach or Ocean Other _____ (List activity) </div>		
STOCK EPINEPHRINE (Check one) Will be available on this trip <u>Will not</u> 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 _____		
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VEHICLE TYPE (Check all that apply.)		
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RISK RELATED (Check all that apply.)		
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VEHICLE TYPE (Check all that apply.)		
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RISK RELATED (Check all that apply.)		
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	<input type="checkbox"/> Students will be directly supervised by adults on this trip at all times <input type="checkbox"/> Students will be directly supervised by adults on this trip with the following exceptions _____ _____ _____	
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<input type="checkbox"/> Walking <input type="checkbox"/> School Bus <input type="checkbox"/> Commercial Carrier <input type="checkbox"/> Personal Vehicle <input type="checkbox"/> Leased Vehicle <input type="checkbox"/> County Vehicle <input type="checkbox"/> None		
DRIVERS OF PRIVATE OR LEASED VEHICLES (Check all that apply.)		
<input type="checkbox"/> Student <input type="checkbox"/> Parent <input type="checkbox"/> Teacher or Staff Member <input type="checkbox"/> Other Adult		
VEHICLE TYPE (Check all that apply.)		
<input type="checkbox"/> Car <input type="checkbox"/> Van (10 passenger or less) <input type="checkbox"/> SUV <input type="checkbox"/> Other _____ <div style="text-align: right; margin-right: 50px;"><i>(Specify)</i></div>		
RISK RELATED (Check all that apply.)		
<input type="checkbox"/> Swimming Pool <input type="checkbox"/> Amusement or Theme Park <input type="checkbox"/> Beach or Ocean <input type="checkbox"/> Other _____ <div style="text-align: right; margin-right: 50px;"><i>(List activity)</i></div>		
STOCK EPINEPHRINE (Check one) Will be available on this trip <input checked="" type="checkbox"/> Will <u>not</u> be available on this trip		

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