



## FIELD/SCHOOL TRIP PERMISSION, RELEASE AND STUDENT CONDUCT AGREEMENT

### STUDENT INFORMATION:

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Name of School \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

In case of emergency and the parent/guardian cannot be notified at the above phone number, please contact:

Mr./Mrs. \_\_\_\_\_ Telephone \_\_\_\_\_  
Alternate \_\_\_\_\_ Telephone \_\_\_\_\_

### CONSENT TO PARTICIPATE

I, as his/her legal parent/guardian, give permission for the above student to participate in school activities/trips during the \_\_\_\_\_ school year:

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

### CONSENT FOR EMERGENCY MEDICAL CARE and RELEASE OF LIABILITY FOR MEDICAL EXPENSES/TRAVEL

I affirm that I am the child's legal parent or guardian. I understand that Natrona County School District #1 (NCSD #1) **does not carry any medical insurance that covers my child during this activity. I release the School District from any responsibility for medical or related travel expenses which occur during or are related to this activity.** I give my permission for an authorized representative of the NCSD #1 to sign for emergency treatment for my child. This form will provide for immediate and all medically necessary treatment. Attached is a list of information that would be necessary to consider in case my child needs immediate medical treatment (Please list any allergies, medications, contact lens, etc.)

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

### **INSURANCE INFORMATION: ONE OF THE FOLLOWING MUST BE INITIALED BEFORE YOUR CHILD IS ALLOWED TO PARTICIPATE.**

I, \_\_\_\_\_, as legal parent/guardian, affirm that my child **is** covered by medical insurance and I will accept the full responsibility for any and all medical and associated travel costs should such be associated with this activity. **I understand that NCSD #1 does not carry medical or travel insurance that would cover my child during the activity.**

Name of Insurance Company: \_\_\_\_\_

I, \_\_\_\_\_, as legal parent/guardian, state that my child **is not** covered by medical insurance and I hereby accept the full responsibility for any and all medical and associated travel costs should such be associated with this activity. **I understand that NCSD #1 does not carry medical or travel insurance that would cover my child during this activity.**

**STUDENT CONDUCT AGREEMENT**

The Natrona County School District (District) believes in an educational atmosphere that respects student rights while expecting students to meet their responsibilities. Students who think about their behavior are mature, positive, constructive and self-motivating people who understand the value of an education. Field trip education is a special privilege and learning opportunity which Students are expected to treat with attention and respect.

**Behavior Expectations:** The District expects the following from all District students at all times:

- Student behavior will be based on respect and consideration for the rights of others
- Students will always keep in mind they are representing the District and behave accordingly
- Students will respect the people and environment in which the field trip or activity takes place
- Students will follow the directions of teachers, chaperones, and guides
- Students will stay with the group at all times unless given specific permission to go on their own
- Students will clean up after themselves on the bus and at the field trip site
- Students will follow all bus, Code of Conduct and Student Handbook rules

**Violations:** The following behaviors violate the student Code of Conduct and/or the Disciplinary Code. Students **who violate these rules while on a field trip or activity are subject to a full range of consequences at the administration’s discretion. Possible consequences include suspension, expulsion and report to law enforcement which may result in arrest.** The list includes, but is not limited to, the following offenses:

- **Assault, battery, fighting and/or threats involving other students, staff or others**
- **Disorderly conduct, destructive and/or disrespectful behavior**
- **False fire alarms or bomb threats**
- **Harassment** – Harassment of any type is prohibited. It may include, but is not limited to:
  - 1) Verbal harassment or abuse
  - 2) Physical intimidation
  - 3) Use of inappropriate language or jokes with sexual implications
  - 4) Display of offensive, sexually graphic materials which are not appropriate in the educational environment
- **Inappropriate display of affection**
  - 1) Unwelcome touching or unsolicited and inappropriate gestures
  - 2) Suggesting or demanding sexual involvement accompanied by implied or explicit threats, and/or consensual or non-consensual sexual activity.
- **Lying and/or forgery**
- **Possession and/or use of tobacco products**
- **Possession, use, sale or transfer of alcohol or other drugs** – The possession, sale, use or distribution of illegal drugs, controlled substances, look-alike drugs, drug paraphernalia or alcoholic beverages by a student or employee is strictly prohibited
- **Possession of lighters, matches, firecrackers and/or dangerous chemicals**
- **Student Attire** – Student attire and grooming should not be offensive, obscene, or disruptive; represent a gang; overexpose the body; endanger the student’s or other students’ health or safety; promote alcohol, drugs, sexually explicit materials and/or violence; or be offensive in any manner. Footwear must be worn at all times.
- **Theft**
- **Vandalism**
- **Weapons (or look-alike weapons)** – no one shall possess weapons or look-alike weapons
- **Willful disobedience**
- Any other conduct that hinders a positive learning/extra-curricular environment is prohibited

**Discipline Plan:** The Discipline Plan encourages students to become self-disciplined individuals with mature attitudes and socially acceptable standards of conduct. The co-curricular Code of Conduct and Student Handbook rules apply, and consequences will be imposed if violated. **Any violation of these expectations will result in an immediate trip home at the parent/guardian time and expense. Suspension, expulsion and/or report to law enforcement may result.**

I \_\_\_\_\_, have read, understand and will follow the behavioral expectations.  
(Student signature)

I \_\_\_\_\_, have read, understand and will support the behavioral consequences.  
(Parent/Guardian signature)

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