

**STUDENT PERMISSION FOR SPECIAL ACTIVITIES**  
**SPRINGFIELD PUBLIC SCHOOLS**  
 School District No. 19  
 Springfield, Oregon

Dear Parents,

In connection with their class instruction, students make planned trips to different places of educational value during the school year. These trips are planned so that the students may learn under the direct supervision of their teacher and other adults who may make the trip.

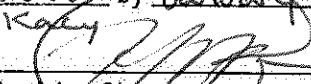
Every possible precaution is taken to insure the safety of the students but since the trips are away from school there is an element of risk involved. The district carries public liability insurance but, like private automobile insurance, it is effective only in cases of proven negligence. Oregon court decisions in the past have tended to hold that a school district engaged in carrying out an educational function is not liable for accidental injury.

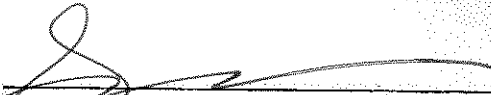
Our district trips, including trips taken outside the State of Oregon, may incur circumstances beyond the control of the district and the trip supervisor. Your signature below indicates your awareness of the potential for unscheduled flight delays, personal security searches, rerouting of travel, and other events beyond the control of the school district. Parents will be liable for all expenses incurred by their child for any events that alter the planned itinerary of the trip.

Students from Marine Biology are travelling to Newport, OR  
 in conjunction with the J-term class on January 21-23, 2015

Only students with properly signed permission slips are allowed to make the trip. The school believes the experience valuable enough to warrant making the trip, but recognizes your right as a parent to decide whether you wish your student to go. If you approve of your student making the trip, please sign and return this permission slip to

Shiloh by January 7<sup>th</sup>, 2015

  
 \_\_\_\_\_  
 Authorizing Signature

  
 \_\_\_\_\_  
 Teacher Signature

**Trip Details:**

What: Newport field trip

Where: Newport, OR

When: January 21<sup>st</sup> - 23<sup>rd</sup> 2015

Who: Marine Biology Class

Cost:

①  
 Food: Breakfast: At School

Lunch: Sack lunch

Dinner: At school

Emergency

Contact #:  
541-760-5488

or  
541-520-8566

**EXCURSION PERMIT**

My approval is hereby given for \_\_\_\_\_ (student) to make the planned trip described above on \_\_\_\_\_ (date). I understand that there is some element of risk involved in taking students away from the school building and that the liability insurance carried by School District #19 is intended to protect against proven negligence. It is my understanding that Oregon court decisions have held school districts not liable for accidental injury when they are engaged in an educational function.

I understand that if my student has any medical concerns that the school needs to be aware of while on this trip, I need to either call the school to update the information or attach the information to this permission slip.

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

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Every possible precaution is taken to insure the safety of the students but since the trips are away from school there is an element of risk involved. The district carries public liability insurance but, like private automobile insurance, it is effective only in cases of proven negligence. Oregon court decisions in the past have tended to hold that a school district engaged in carrying out an educational function is not liable for accidental injury.

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Students from Marine Biology are travelling to Yachats, OR  
 in conjunction with the 2-term class on January 16<sup>th</sup>, 2015

Only students with properly signed permission slips are allowed to make the trip. The school believes the experience valuable enough to warrant making the trip, but recognizes your right as a parent to decide whether you wish your student to go. If you approve of your student making the trip, please sign and return this permission slip to Shilah or by January 7<sup>th</sup>, 2015.

\_\_\_\_\_  
 Authorizing Signature

\_\_\_\_\_  
 Teacher Signature

**Trip Details:**

What:  
Tide Pools field Trip

Where:  
Yachats, OR

When:  
January 16<sup>th</sup>, 2015

Who:  
Marine Biology Class

Cost:

0

Food:  
Bring lunch or arrange to have a school lunch made.

Emergency Contact #:  
541-760-5488  
 or  
541-520-8566

**EXCURSION PERMIT**

My approval is hereby given for \_\_\_\_\_ (student) to make the planned trip described above on 1/16/15 (date). I understand that there is some element of risk involved in taking students away from the school building and that the liability insurance carried by School District #19 is intended to protect against proven negligence. It is my understanding that Oregon court decisions have held school districts not liable for accidental injury when they are engaged in an educational function.

I understand that if my student has any medical concerns that the school needs to be aware of while on this trip, I need to either call the school to update the information or attach the information to this permission slip.

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

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Students from Marine Biology are travelling to OSU  
 in conjunction with the 2<sup>nd</sup> Trn Class on January 9<sup>th</sup>, 2015.

Only students with properly signed permission slips are allowed to make the trip. The school believes the experience valuable enough to warrant making the trip, but recognizes your right as a parent to decide whether you wish your student to go. If you approve of your student making the trip, please sign and return this permission slip to

Shiloh or by January 9<sup>th</sup>, 2015  
Kacy

\_\_\_\_\_  
 Authorizing Signature

\_\_\_\_\_  
 Teacher Signature

**Trip Details:**

What: Marine Biology Field Trip

Where: OSU, Corvallis, OR

When: 10:30 - January 9<sup>th</sup>, 2015

Who: Marine Biology Class

Cost: 0 (unless buying lunch)

Food: Bring lunch or bring money for food  
Emergency contact.

Contact #: 541-760-5488  
or

541-520-8566

**EXCURSION PERMIT**

My approval is hereby given for \_\_\_\_\_ (student) to make the planned trip described above on 1/9/15 (date). I understand that there is some element of risk involved in taking students away from the school building and that the liability insurance carried by School District #19 is intended to protect against proven negligence. It is my understanding that Oregon court decisions have held school districts not liable for accidental injury when they are engaged in an educational function.

I understand that if my student has any medical concerns that the school needs to be aware of while on this trip, I need to either call the school to update the information or attach the information to this permission slip.

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

STUDENT PERMISSION  
PAGE 2  
MEDICAL INFORMATION

STUDENT NAME \_\_\_\_\_

Emergency contact name and phone number: \_\_\_\_\_  
\_\_\_\_\_

Diabetes: Y N      Seizures: Y N

Allergies: Y N    If yes, please list allergen and treatment for reaction:  
\_\_\_\_\_  
\_\_\_\_\_

Epinephrine injection required for allergies: Y N

Daily medications (prescription and non-prescription) Please list:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Additional Information:**

Insurance Provider: \_\_\_\_\_

Group/Policy number: \_\_\_\_\_

Primary Physician: \_\_\_\_\_

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

In the event an emergency, I give my permission to a Springfield School District representative to seek emergency medical help for my student.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date