Lake Washington Lake Washington School District

School District Parent/Guardian Field Trip Informed Consent Form

| I hereby give my permission for |
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| (name of student) |
| who attends ENVIRONMENTAL & ADVENTURE SCHOOL (EAS) |
| (school) |
| to participate in a field trip to <u>CENTRAL OREGON</u> |
| (destination) |
| on <u>4/24/2023</u> to <u>4/29/2023</u> for the purpose of: <u>mountain biking, camping, teamwork & collaboration,</u> <u>exploration of Oregon's National Forest lands, personal challenge and adventure.</u> |
| Transportation for this activity will be provided by:private charter bus (Green Tortoise) |
| As parent, or legal guardian, I authorize a qualified physician to examine the above-named student andin the event of injury to administer emergency care and to arrange for any consultation by a specialist, including a surgeon, as deemed necessary to insure proper care of any injury. I understand that every effort will be made to contact parent or guardian to explain the nature of the problem prior to any involved treatment. |
| In the event it becomes necessary for Lake Washington School district staff-in-charge to obtain emergency care for your student, neither the staff-in-charge nor Lake Washington School District assumes financial liability for expenses incurred because of accident, injury, illness, and/or unforeseencircumstances. |
| Student address: |
| Parent phone:Date of birth: |
| Describe any medical condition, including allergies that could impact the student's field trip experience: |
| NoneSee below |
| On the line below, please print parent/guardian name, and home, work and/or cellular phone number: |
| In the event of an emergency (injury, illness, and unforeseen incident), the following person must benotified in case the parent/guardian cannot be contacted: |
| Name:Phone: |
| I have received the trip itinerary and understand that the school district will make every reasonable effort to provide a safe environment during this learning excursion. As the parent/guardian of the above-named student I understand that there are inherent risks associated with participation in these activities including physical injury, |

and/or otherconsequences. I acknowledge that school rules apply on all field trips/excursions and that serious non-compliance on the part of a student will result in contacting parents to pick up their child for the remainder of the week.