

MONTEREY COUNTY OFFICE OF EDUCATION

FIELD TRIP FORM FOR PARENTS, VOLUNTEERS, AND DRIVERS

Activity Date: _____ Departure time: _____ Return time: _____

School: _____ Program: _____ Teacher: _____

Destination: _____

Parent/Volunteer/Driver Name: _____ Phone: _____

Parent/Volunteer/Driver Address: _____

Please fill out Section I (waiver, release, and consent for treatment) **and Section II** (personal vehicle use form) (drivers only) below and return this signed Field Trip Form for Parents, Volunteers, and Drivers to me by no later than _____.

SECTION I: WAIVER, RELEASE, AND CONSENT FOR TREATMENT

Please carefully read each box below and initial below each box to indicate that you have read and agree to its terms.

Parent/Volunteer/Driver Initials: _____

Parent/Volunteer/Driver Initials: _____

Primary Care Doctor: _____ Phone: _____

Medical Ins. Provider: _____ Policy/Group No.: _____

Emergency Contact: _____ Phone: _____

Waiver and Release:

California law (Education Code 35330) provides that any person making a field trip or excursion waives all claims against the Monterey County Office of Education, its employees, and the State of California for injury, accident, illness, or death occurring during, or by reason of, the above-described field trip or excursion. In addition, all adults taking out-of-state field trips or excursions and all parents or guardians of students taking out-of-state field trips or excursions must sign a statement waiving all claims. **ACCORDINGLY, I HEREBY ACKNOWLEDGE THAT I RELEASE, DISCHARGE, AND WAIVE ALL CLAIMS WHICH I MAY HAVE AGAINST THE MONTEREY COUNTY OFFICE OF EDUCATION AND/OR THE STATE OF CALIFORNIA** and their respective officers, agents, governing board and employees from all liability arising out of or in connection with the above-described activity or all liabilities associated with any and all claims related to such activity that may be filed on or behalf of or for me. I understand that this release, discharge, and waiver includes any claims related to vehicle damages.

SECTION II: PERSONAL VEHICLE USE FORM (DRIVERS ONLY)

Driver Name: _____ Phone: _____

Driver Address: _____

Job Title (MCOE Employees Only): _____

Vehicle Make: _____ Model: _____ Year: _____

Vehicle is Registered to: _____

CA Driver's License Number: _____ Expiration: _____

Please carefully review the following requirements and check the following boxes to indicate your agreement.

- I have a valid, current California driver's license or I am a nonresident on active military duty in California with a valid, current out-of-state license.
- I am currently age 18 or older.
- My vehicle is currently in good repair and mechanical condition and is equipped with seat belts or child passenger restraint systems in accordance with law.
- I currently maintain the following insurance coverage (minimum requirements):

___ Bodily Injury: \$100,000/\$300,000 per accident
___ Property Damage: \$25,000 per accident
___ Medical Payments: \$2,000

Insurance Company: _____

Effective Dates: _____

Policy Number: _____

Policy Limits: _____

- I will operate my vehicle and transport students in accordance with all policies and guidelines established by the Monterey County Office of Education, including the attached Driver Instructions.
- Monterey County Office of Education employees: I understand that the use of my personal vehicle during working hours is voluntary.

Consent for Treatment:

In the event of an illness, injury, or other emergency situation, I hereby authorize a representative of the Monterey County Office of Education to make such arrangements as he/she considers necessary for me to receive medical or hospital care, including transportation. Under such circumstances, I further authorize the below-named physician to undertake such care and treatment of me as he/she considers necessary. In the event the below-named physician is not available, I authorize such care and treatment to be performed by any licensed health care professional.

My responses above are complete and accurate. I have read and agree to the terms set forth in Sections I and II above.

Parent/Volunteer/Driver Name: _____

Parent/Volunteer/Driver Signature: _____ Date: _____

DRIVER INSTRUCTIONS

When using your vehicle to transport students on field trips or other school activity trips, you must:

1. Be sure that you have a valid driver's license and current liability insurance in the following minimum amounts:

Bodily Injury:	\$100,000/\$300,000 per accident
Property Damage:	\$25,000 per accident
Medical Payments:	\$2,000

2. Before the trip: Check the safety of your vehicle: tires, brakes, lights, horn, suspension, etc.
3. Carry only the number of passengers for which your vehicle was designed. If you have a truck or pickup, carry only as many as can safely sit in the passenger compartment. No private vehicle shall carry more than eight (8) passengers, including the driver.
4. Demonstrate good judgment while in the company of the children:
 - a. Operate your vehicle in a safe and prudent manner and follow and obey all the rules of the California Vehicle code.
 - b. Do not smoke in the car while children are present. "Smoking" means having in your immediate possession a lighted pipe, cigar, or cigarette containing tobacco or any other plant.
 - c. Do not consume any alcoholic beverages prior to departure on the field trip or during the field trip.
5. Require each passenger to use a seat belts or child passenger restraint system in accordance with law.
6. Field trips leaving Monterey County shall carry a first-aid kit, a B-1 fire extinguisher, and three (3) 20-minute road flares.
7. Carry with you the list of participating students.
8. Do not return from trip until all students are present and accounted for.
9. Ask students to check for personal belongings at the end of trip.