Field Trip Forms



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Harford County Public Schools Form 1 Day and Extended-day Field Trip Checklist

Field trips are considered an integral part of the curriculum programming for Harford County Public Schools. We encourage schools to provide at least one field trip opportunity per school year for students to engage in meaningful learning experiences outside of the school walls. The checklist below will provide guidance and organization to school teams or teachers to plan safe and orderly field trip experiences for students.

Field Trip Policy and Procedures

- Harford County Public Schools Field Trip Procedures
- Harford County Public Schools Distribution of Information Regarding Trips
- Harford County Public Schools Ethics Policy
- Harford County Public Schools Statement of Ethics

Pre-Trip Planning

☐ If not already a registered user of Travel Tracker, register:	
https://appgarden15.app-garden.com/TravelTrackMD012.nsf	
If a new user, take Travel Tracker training:	
https://vimeopro.com/user30837749/travel-tracker-training/video/289750127	
Bookmark to access Travel Tracker in the future:	
https://appgarden15.app-garden.com/TravelTrackMD012.nsf	
Review Travel Tracker "New Trip Request Form" to prepare information prior to submitting the form. When ready start new trip request.	
If your trip location is not on the pre-loaded common destinations list, then choose	
"Other" for Risk Management approval. Office of Risk Management will review	
locations, vendor contracts, and vendor forms intended for students.	
1. No waivers permitted.	
2. No water parks or swimming permitted.	
3. No trampoline parks or adventure facilities with harnessed activities permitted.	
If your charter bus is not on the approved charter list, you will be required to obtain	
Certificate of Insurance to include:	
 General Liability Coverage listed with \$5 million limit (can include umbrella); 	
2. Auto Liability Coverage & Limits with \$5 million limit;	
3. Worker's Compensation Coverage; and	
4. The Board of Education of Harford County listed as named additional insured.	
Online Field Trip Application is approved through Travel Tracker. The school nurse	
food & nutrition, and the lead secretary will receive automatic notices of the approval	
If P-Card is indicated on third party payment, the P-Card coordinator will also receive	
notice of the trip	



Harford County Public Schools Form 1 Day and Extended-day Field Trip Checklist

	Field twin destination seesand
	Field trip destination secured. Master Calendar cleared and notated.
	<u>Day and Extended-day Field Trip Letter With Chaperone</u> or <u>Day and Extended-day Field Trip Permission Form Without Chaperone</u> created, approved, and distributed.
	Forms may indicate sponsorship of trip (i.e. PTA), but cannot be addressed under the direction of the sponsoring organization. All letters, communication, and authority regarding field trips are communicated through the school.
	All forms or documents required by the field trip vendor have been approved prior to including with the HCPS permission forms. Waivers are not permitted.
Week pri	or to the field trip
	List of students attending to Special Area teachers, Main Office Nurse, Cafeteria Manager.
	Create a bus list of students.
	Confirmation call to field trip destination.
	Contact cafeteria to arrange bag lunches for free/reduced lunch students.
	Pick up medication and field trip backpacks from nurse. You will also need to be trained by the nurse on how to administer any medications.
	Review emergency action plans specific to this field trip.
	Chaperone list, including teachers and other staff members who are attending the field trip, to principal or principal's designee.
	Chaperones are entered into the Visitor's Management System. A sign in procedure for the day of the trip is established.
	Package for each chaperone, to include:
	 List of students for which he/she is responsible;
	 Name tags for each of the students on chaperone list, if applicable;
	• Typed itinerary (give times of departure, lunch, etc.);
	Bus number assigned;
	Pencil and paper;
	 Notify office where chaperones will meet;
	 Contact phone number for teacher in charge of field trip; and
	Reminder card outlining chaperone responsibilities.
	Master list of chaperones with their students and bus assignments.
	Notification to restaurant of expected lunch increase if stopping for lunch.
	Appropriate work left behind for students who are not attending the field trip, if applicable.



Harford County Public Schools Form 2 Day and Extended-day Field Trip Chaperone Agreement Form

1	O .
Name (as it appears on Driver's License)	Address
Trip Destination	Student's Name
Date(s) of Trip	Student's Classroom/Homeroom Number
Address	Home Phone Number Cell Phone Number
RESPONSIBILITIE	S OF CHAPERONES
 You must agree to: Sign in at school prior to the field trip and sign out p to be entered into the Visitor Management System processes school to pre-register, which will save time the morn 1. Supervise students and follow the directions 2. Seat yourself at certain points on the bus(es) 3. Report behavior concerns to the sponsoring to responsibility of the chaperone to discipline sequences 4. Not bring visitors, children, siblings, or other 5. Remain with your group during all scheduled student at any time. 6. Report any incidents or situations that may perfect the members of the instructional team and the interpretation of school policies, rules and the interpretation of school policies, rules and the interpretation of school policies and the refraining from smoking and use of alcohol. For this field trip, chaperones: must provide own transportation, or □ will be a constant. 	rior to leaving the school grounds. Chaperones need rior to the field trip. If possible, please stop by the ting of the trip. of the sponsoring teacher or other school personnel. as determined by the sponsoring teacher. eacher or other school personnel. It is not the students at any time. Is in your care on the trip. I activities. No chaperone may be alone with a single cose a safety concern to a member of the instructional teams, or altercations to a member of the instructional teams and procedures. For behavior while on school grounds. This includes the same that the students are the school grounds. This includes the same that the same that the same trip is a specific to ride the bus with students. I have fees associated with the cost of the trip paid by
above.	
Chaperone Signature	Relationship to Child



Form 3 (Page 1 of 2) - Day and Extended-day Field Trip Letter and Permission Form With Chaperone

INSERT DATE

Dear Parents and Guardians:

On INSERT DATE A, your child is invited to take an educational field trip with his/her class to INSERT LOCATION. The purpose of this field trip is to INSERT PURPOSE.

This trip has been planned in such way to be beneficial to each student with specific consideration to the safety of all participants. An appropriate number of teachers and staff members will provide supervision for the group during the trip. We plan to depart from school promptly at INSERT DEPARTURE TIME and will return at approximately INSERT RETURN TIME. It is important that your child arrives at school in a timely manner so he/she may participate in the trip. Please note, any adjustment to the field trip timeline or schedule presented by the school must have prior permission by the principal.

Your permission is necessary in order for your child to participate in this field trip. Please complete, sign, and return the form by INSERT RETURN DATE B.

Your child will have the choice to pack his/her lunch, may choose to purchase a lunch prepared by the school, or if appropriate, may purchase a lunch/food during the trip. Please only provide plastic bottles or utensils for lunch. If you would prefer that your child purchase a brown bag lunch from the school, please check that box on the field trip permission slip below.

Field trip chaperones will be selected from a pool of interested candidates. If you are interested in participating in this field trip as a chaperone, please:

- 1. Check the appropriate box for consideration of chaperoning duties. If selected as a chaperone, I understand I am required to complete the *Day and Extended-day Chaperone Agreement Form*.
- 2. Only parents/guardians who are selected as chaperones may participate in this trip and will be notified via phone or email. Siblings/relatives may not participate in the field trip.

This field trip is intended to support and enhance your child's instructional program. The school may cancel a field trip at any time and will not be held responsible for cancelled trips. While present, students are expected to honor the school's behavioral expectations as all school rules and policies apply.

We look forward to a meaningful learning experience!

Sincerely,

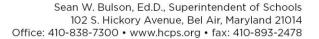
INSERT TEAM, TEACHER, OR TEACHERS





Form 3 (Page 2 of 2)

Please complete, sign, and return to your child's teacher by INSERT RETURN DATE B.		
My child,, has my permission to participate in the field trip to INSERT LOCATION 1. The nature of the activity at this location includes: INSERT DESCRIPTION OF ACVITY. The cost of this trip is \$ Please include cash or check made out to the school. For questions contact the school.		
In the event of an emergency, please contact me at: HOME PHONE: CELL PHONE: WORK PHONE: In the event you cannot contact me, please contact the following person at the number provided.		
 Please check any of the following that apply: □ I am interested in chaperoning this trip. If selected as a chap the Day and Extended-day Chaperone Agreement Form, whi child prior to the field trip. □ I will pack a bagged lunch for my child. □ I will purchase a bagged lunch from the school cafeteria. □ I understand my child may purchase food during the trip. 		
Parent/Guardian Signature	Relationship to Child	
Printed Parent/Guardian Name ACKNOWLEDGEMENT	Date	
I understand that my child's participation in this field trip is voluntar involved in this participation that would be present for all types of ple that neither protective equipment, safety rules, nor instruction will precommunicate any concerns I have about this activity and ask question have/my child has read and agree(s) to abide by the terms and condit policies/procedures, and to abide by all decisions made by teachers, agree that my child's participation in this trip may at any time be termy child's failure to follow these rules, or for any reason deemed to safety/security of HCPS students/staff, and that my child may be sen understand that if I use my private vehicle to transport my child on a risk. I have read and understand the description of the field trip.	revent all injuries. I will seek to ns as they arise. I state that I tions set forth in the HCPS staff, and those in authority. I minated by HCPS in the light of be in the best interest of the t home at my own expense. I field trip, I do so at my own	
Parent/Guardian Signature	Date	





Form 4 (Page 1 of 2)- Day and Extended-day Field Trip Letter and Permission Form Without Chaperone

INSERT DATE

Dear Parents and Guardians:

On INSERT DATE A, your child is invited to take an educational field trip with his/her class to INSERT LOCATION. The purpose of this field trip is to INSERT PURPOSE.

This trip has been planned in such way to be beneficial to each student with specific consideration to the safety of all participants. An appropriate number of teachers and staff members will provide supervision for the group during the trip. We plan to depart from school promptly at INSERT DEPARTURE TIME and will return at approximately INSERT RETURN TIME. It is important that your child arrive to school in a timely manner so he/she may participate in the field trip. Please note, any adjustment to the field trip timeline or schedule presented by the school must have prior permission by the principal.

Your permission is necessary in order for your child to participate in this field trip. Please complete, sign, and return the form by INSERT RETURN DATE B.

Your child will have the choice to pack his/her lunch, may choose to purchase a lunch prepared by the school, or if appropriate, may purchase a lunch/food during the trip. Please only provide plastic bottles or utensils for lunch. If you would prefer that your child purchase a brown bag lunch from the school, please check that box on the field trip permission slip below.

Due to the nature of the field trip, chaperones will not be needed at this time.

This field trip is intended to support and enhance your child's instructional program. The school may cancel a field trip at any time and will not be held responsible for cancelled trips. While present, students are expected to honor the school's behavioral expectations as all school rules and policies apply.

We look forward to a meaningful learning experience!

Sincerely,

INSERT TEAM, TEACHER, OR TEACHERS





Form 4 (Page 2 of 2)

Please complete, sign, and return to your child's teacher by INSERT RETURN DATE B.		
My child,, has my permission to participate in the fitrip to INSERT LOCATION 1. The nature of the activity at this location includes: INSERT DESCRIPTION OF ACVITY. The cost of this trip is \$ Please include cash or check material out to the school. For questions contact the school.		
In the event of an emergency, please contact me at: HOME PHONE: CELL PHONE: WORK PHONE:		
In the event you cannot contact me, please contact the following	g person at the number provided.	
ALTERNATIVE CONTACT:PHONE:		
Please check any of the following that apply: \[\subseteq \text{I will pack a bagged lunch for my child.} \] \[\subseteq \text{I will purchase a bagged lunch from the school cafeteria.} \] \[\subseteq \text{I understand my child may purchase food during the trip.} \]		
Parent/Guardian Signature	Relationship to Child	
Printed Parent/Guardian Name	Date	
ACKNOWLEDGEMENT	Γ	
I understand that my child's participation in this field trip is voluinvolved in this participation that would be present for all types that neither protective equipment, safety rules, nor instruction we communicate any concerns I have about this activity and ask que have/my child has read and agree(s) to abide by the terms and compolicies/procedures, and to abide by all decisions made by teach agree that my child's participation in this trip may at any time be my child's failure to follow these rules, or for any reason deemes afety/security of HCPS students/staff, and that my child may be understand that if I use my private vehicle to transport my child risk. I have read and understand the description of the field trip.	of physical activity. I acknowledge ill prevent all injuries. I will seek to estions as they arise. I state that I onditions set forth in the HCPS ers, staff, and those in authority. I e terminated by HCPS in the light of d to be in the best interest of the e sent home at my own expense. I on a field trip, I do so at my own	
Parent/Guardian Signature	Date	



Form 5 (Page 1 of 2)- Harford Glen Field Trip Letter and Permission Form Without Chaperone

Dear Parents and Guardians:

On INSERT DATE A, your child is invited to take an educational field trip with his/her class to Harford Glen. This field trip is a culminating activity to the Cooperative Games and Initiatives unit in physical education class. Your child will spend the entire day outdoors at Harford Glen working to solve initiative challenges with other classmates. The students will participate in a number of the low elements on the County's ropes course. The students are given the option of "challenge by choice." This allows students the flexibility of being involved even if they do not want to participate in a certain challenge. The students will be climbing on low cables suspended between trees, swinging on low suspended tires while wearing helmets, and spotting one another through a variety of other challenges. This trip has been planned in such way to be beneficial to each student with specific consideration to the safety of all participants. While there is risk involved in the activities, students are guided through each challenge by a trained facilitator and taught numerous safety guidelines for each initiative. Harford Glen has a full-time nurse in residence.

An appropriate number of teachers and staff members will provide supervision for the group during the trip. Due to the nature of the field trip, chaperones will not be needed at this time. We plan to depart from school promptly at INSERT DEPARTURE TIME and will return at approximately INSERT RETURN TIME. It is important that your child arrive to school in a timely manner so he/she may participate in the field trip. Please note, any adjustment to the field trip timeline or schedule presented by the school must have prior permission by the principal.

Your permission is necessary in order for your child to participate in this field trip. Please complete, sign, and return the form by INSERT RETURN DATE B.

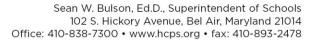
Your child will have the choice to pack his/her lunch or may choose to purchase a lunch prepared by the school. Please only provide plastic bottles or utensils for lunch. If you would prefer that your child purchase a brown bag lunch from the school, please check that box on the field trip permission slip below.

This field trip is intended to support and enhance your child's instructional program. The school may cancel a field trip at any time and will not be held responsible for cancelled trips. While present, students are expected to honor the school's behavioral expectations as all school rules and policies apply.

We look forward to a meaningful learning experience!

Sincerely,

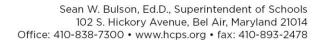
INSERT TEAM, TEACHER, OR TEACHERS





Form 5 (Page 2 of 2)

Please complete, sign, and return to your child's teacher by INSERT	RETURN DATE B.
My child,, has my permitrip to INSERT LOCATION 1. The nature of the activity at this local DESCRIPTION OF ACVITY. The cost of this trip is \$ Plea out to the school. For questions contact the school.	ission to participate in the field ation includes: INSERT se include cash or check made
In the event of an emergency, please contact me at: HOME PHONE: CELL PHONE: WORK PHONE:	
In the event you cannot contact me, please contact the following personal states are supported by the states of th	son at the number provided.
ALTERNATIVE CONTACT:PHONE:	
Please check any of the following that apply: ☐ I will pack a bagged lunch for my child. ☐ I will purchase a bagged lunch from the school cafeteria. ☐ I understand my child may purchase food during the trip.	
Parent/Guardian Signature	Relationship to Child
Printed Parent/Guardian Name	Date
ACKNOWLEDGEMENT	
I understand that my child's participation in this field trip is voluntar involved in this participation that would be present for all types of phenomenate that neither protective equipment, safety rules, nor instruction will precommunicate any concerns I have about this activity and ask question have/my child has read and agree(s) to abide by the terms and condit policies/procedures, and to abide by all decisions made by teachers, agree that my child's participation in this trip may at any time be term my child's failure to follow these rules, or for any reason deemed to safety/security of HCPS students/staff, and that my child may be sen understand that if I use my private vehicle to transport my child on a risk. I have read and understand the description of the field trip.	nysical activity. I acknowledge revent all injuries. I will seek to ns as they arise. I state that I ions set forth in the HCPS staff, and those in authority. I minated by HCPS in the light of be in the best interest of the t home at my own expense. I
Parent/Guardian Signature	Date





Risk Management Office

Julie Uehlein, Risk Manager P: (410) 588-5286 • F: (410) 588-5294

Form 6 (Page 1 of 2) – Anita C. Leight Field Trip Document

Dear Parent/Guardian,

In addition to permission granted to Harford County Public Schools to take your student on this field trip, Harford County Government is requiring the attached document to be signed. Please read this form as it is a legal document with terms and conditions that are important to your rights as a parent/guardian. If you choose not to sign, the teacher(s) will provide an alternative assignment for your student to be completed at school on the day of the scheduled trip.

Thank you,

Julie uehlein

Risk Manager Harford County Public Schools

Form 6 (Page 2 of 2)

Minor

RELEASE OF LIABILITY Anita C. Leight Estuary Center

17-807

PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only)

As a policy requirement, a release of Liability Form shall be signed as a condition of attendance. In consideration for permitting the guest to attend and participate in the activities, I have agreed to execute this Release of Liability and Assumption of Risks (the "Release").

I fully understand and acknowledge that: (a) liabilities and dangers exist in my child's use of equipment and my child's participation in activities which may result in injury, illness, death or damage to personal property caused by other participants, by accidents, or by the forces of nature or other causes, (b) liabilities and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, liability of falling out of a canoe and such other liabilities, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment and I hereby accept and assume these liabilities and dangers for myself and on behalf of my child participating in such activities or any other activities sponsored by or involving Harford County, Maryland. As well as any other risks involved in any activities sponsored by or involving Otter Point Creek Alliance, Inc.; that were not caused by the negligence of Otter Point Creek Alliance, Inc.

I have been advised that my child must wear an approved personal flotation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use or consume these substances before or during her/his scheduled activities. Any claims or dispute arising from my child's participation in these activities or use of equipment shall have venue exclusive in Harford County, Maryland.

I do hereby expressly agree to release Harford County, Maryland, a body corporate and politic of the State of Maryland, and its elected and appointed officials, agents, officers, and employees, from all liability arising from any harm or injury, including death, sustained by my child while participating in this program. I do hereby also expressly agree to release Otter Point Creek Alliance, Inc., its employees, volunteers and agents from liability arising from any harm or injury, including death, sustained by my child while participating in this program.

Nothing set forth herein shall be construed as a waiver on the part of Harford County, Maryland, a body corporate and politic of the State of Maryland and its elected and appointed officials, agents, officers and employees of any defense, immunity, limitation of liability or restriction of damages under applicable law.

Unless otherwise indicated by a parent in writing at the time of registration, photographs of participants may be taken while participating in the program activities for use in publications. No personal information other than the participant's first name will be released under any circumstances.

In accordance to Maryland law, I understand that information on Youth Sports Concussion and Head Injuries is available at http://www.cdc.gov/headsup/youthsports/index.html and information on Sudden Cardiac Arrest at http://www.nhlbi.nih.gov/health/health-topics/topics/scda/.

The above agreement shall be binding on my heirs, assigns, and Personal Representatives and my child's heirs, assigns, and Personal Representatives.

I HAVE READ THE ABOVE AND BY SIGNING IT AGREE IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN ACTIVITIES INCLUDING CANOEING AND TO ASSUME ALL LIABILITIES ASSOCIATED THEREWITH ON MY BEHALF AND ON BEHALF OF MY CHILD.

I hereby grant permission for my child/children listed below to participate

Activity:	Date(s):	
Activity:	Date(s):	
Activity:	Date(s):	
Activity:	Date(s):	
Child's Name:	Age:	
Child's Name:	Age:	
Child's Name:	Age:	
Parent's Name (Print):	Signature:	
Address:	Phone(s):	





Risk Management Office

Julie Uehlein, Risk Manager

P: (410) 588-5286 • F: (410) 588-5294

Form 7 (Page 1 of 2) – Eden Mill Field Trip Document

Dear Parent/Guardian,

In addition to permission granted to Harford County Public Schools to take your student on this field trip, Harford County Government is requiring the attached document to be signed. Please read this form as it is a legal document with terms and conditions that are important to your rights as a parent/guardian. If you choose not to sign, the teacher(s) will provide an alternative assignment for your student to be completed at school on the day of the scheduled trip.

Thank you,

Julie uehlein

Risk Manager Harford County Public Schools

rev. 9/29/16

RELEASE OF LIABILITY Eden Mill Nature Center

PARENT/GUARDIAN PERMISSION FORM

(This form to be used for minors only)

As a policy requirement, Eden Mill Nature Committee, Inc. requires a release of Liability Form to be signed as a condition of attendance. In consideration for Eden Mill Nature Committee, Inc. permitting the guest to attend and participate in the activities, I have agreed to execute this Release of Liability and Assumption of Risks (the "Release").

I fully understand and acknowledge that: (a) liabilities and dangers exist in my child's use of Eden Mill Nature Committee, Inc. equipment and my child's participation in Eden Mill Nature Committee, Inc. activities which may result in injury, illness, death or damage to personal property caused by other participants, by accidents, or by the forces of nature or other causes, (b) liabilities and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, selection of trail or river route, water level, weather conditions, liability of falling out of a canoe and such other liabilities, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment and I hereby accept and assume these liabilities and dangers for myself and on behalf of my child participating in such activities. As well as any other risks involved in any activities sponsored by or involving Eden Mill Nature Committee, Inc., that were not caused by the negligence of Eden Mill Nature Committee, Inc.

I have been advised that my child must wear an approved personal flotation device at all times while on the water. I affirm that my child will not be under the influence of alcohol or controlled substance, and will not carry, use or consume these substances before or during her/his scheduled Eden Mill Nature Committee, Inc. activities. Any claims or dispute arising from my child's participation in Eden Mill Nature Committee, Inc. activities or use of their equipment shall have venue exclusive in Harford County, Maryland.

I do hereby expressly agree to release Eden Mill Nature Committee, Inc., its employees, volunteers, and agents and Harford County, Maryland, a body corporate and politic of the State of Maryland, and its elected and appointed officials, agents, officers, and employees, from liability arising from any harm or injury, including death, sustained by my child while participating in this program.

Nothing set forth herein shall be construed as a waiver on the part of Eden Mill Nature Committee, Inc., or Harford County, Maryland, a body corporate and politic of the State of Maryland and its elected and appointed officials, agents, officers and employees of any defense, immunity, limitation of liability or restriction of damages under applicable law.

Unless otherwise indicated by a parent in writing at the time of registration, photographs of participants may be taken while participating in the program activities for use in publications. No personal information other than the participant's first name will be released under any circumstances.

In accordance to Maryland law, I understand that information on Youth Sports Concussion and Head Injuries is available at http://www.cdc.gov/headsup/youthsports/index.html and information on Sudden Cardiac Arrest at http://www.nhlbi.nih.gov/health/health-topics/topics/scda/.

I hereby grant permission for my child/children listed below to participate in Eden Mill Nature Committee, Inc.:

The above agreement shall be binding on my heirs, assigns, and Personal Representatives and my child's heirs, assigns, and Personal Representatives.

I HAVE READ THE ABOVE AND BY SIGNING IT AGREE IT IS MY INTENTION TO GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN <u>EDEN MILL NATURE COMMITTEE, INC</u>. ACTIVITIES INCLUDING CANOEING AND TO ASSUME ALL LIABILITIES ASSOCIATED THEREWITH ON MY BEHALF AND ON BEHALF OF MY CHILD.



Harford County Public Schools Form 8 Overnight Field Trip Checklist

The school system approves overnight field trips on a case-by-case basis. The teacher, school, and school system are responsible for the health and safety of the students twenty-four hours each day when such a trip is taken. The checklist below will provide guidance and organization to school teams or teachers to plan a safe and orderly field trip experience.

Field Trip Policy and Procedures

- Harford County Public Schools Field Trip Procedures
- Harford County Public Schools Distribution of Information Regarding Trips
- Harford County Public Schools Ethics Policy
- Harford County Public Schools Statement of Ethics

Pre-Trip Planning

Overnight trip request should be completed prior to informing parents and students about the trip.
If possible, please allow two months for the approval process, especially for trips that include
non-curriculum based excursions, travel agencies, or an extensive itineraries.
If not already a registered user of Travel Tracker, register:
https://appgarden15.app-garden.com/TravelTrackMD012.nsf
If a new user, take Travel Tracker training:
https://vimeopro.com/user30837749/travel-tracker-training/video/289750127
Bookmark to access Travel Tracker in the future:
https://appgarden15.app-garden.com/TravelTrackMD012.nsf
Review Travel Tracker "New Trip Request Form" to prepare information prior to submitting the
form. Be sure to choose "Overnight" when reviewing the form. When ready, start new trip
request.
Office of Risk management will review locations, vendor contracts, and vendor forms
intended for students.
4. No waivers permitted.
5. No water parks or swimming permitted.
6. No trampoline parks or adventure facilities with harnessed activities permitted.
7. No videos produced by travel agencies of students permitted.
If your charter bus is not on the approved charter list, you will be required to obtain
Certificate of Insurance to include:
1. General Liability Coverage listed with \$5 million limit (can include umbrella);
2. Auto Liability Coverage & Limits with \$5 million limit;
3. Worker's Compensation Coverage; and
4. The Board of Education of Harford County listed as named additional insured.
If you are utilizing a travel agency:
1. You may need to submit a certificate of insurance for the agency if a member of the travel
agency staff physical participates in the trip in whole or in part.

HCPS

Harford County Public Schools Form 8 Overnight Field Trip Checklist

- 2. You may need to submit a certificate of insurance and background check documentation if you are utilizing a security company.
- 3. A detailed cost break-down of the trip should still be obtained, rather than just one "packaged amount."
- 4. Work with Risk Mangement to determine if Trip Insurance should be purchased. In general, trip cancellation insurance and trip accident insurance have different purposes and any travel agent policy should be reviewed.

If you are using a security company, please contact Risk Management to coordinate	
documentation needs for background checks and insurance.	
Online Field Trip Application is approved through Travel Tracker. The school nurse, food & nutrition, and the lead secretary will receive automatic notices of the approval. If P-Card is	
indicated on third party payment, the P-Card coordinator will also receive notice of the trip.	
Master Calendar cleared and notated.	
Field trip destination/activities secured.	
Field trip arrangements for staff attending have been made. For trips that have both	
male and female students, at least one male and one female staff member must represented on the trip.	
Field trip accommodations secured.	
1. Sleeping arrangements should be planned whereby room assignments consider gender identity and age.	
2. Students may not share beds. For hotel rooms with two double beds, three students	
should be assigned per room, whereby one student may use a pull out couch or cot.	
3. Chaperones will not sleep in the same room as students that are not their children.	
4. A plan must be made for supervision during overnight accommodations. For	
elementary age students, a suite-style or adjoining room would be appropriate. For	
middle and high school, room checks, key retrieval, hall checks, etc can be utilized.	
Payment accepted in check or money order only. Method of payment planned and	
communicated with students, parents and administration.	
Fundraisers approved by Principals.	
**	
Medication Policy and Permission form distributed and obtained from students	
Where applicable, "permission for students to carry/self-administer medications"	
distributed and obtained from students.	
Overnight Field Trip Permission Form completed, approved, and distributed. Slip should	
include:	
1. Forms may indicate sponsorship of trip (i.e. PTA), but cannot be addressed under the	
direction of the sponsoring organization. All letters, communication, and authority regarding field trips are communicated through the school.	
Overnight Chaperone Agreement Form signed.	



Harford County Public Schools Form 8 Overnight Field Trip Checklist

Week prior to the Trip

Review emergency action plans specific to this field trip.
List of students attending to administration
Method of emergency communication planned and communicated (i.e. phone chain, text app,
etc.)
Confirmation call to field trip destination and/or field trip vendor.
Confirmation call to hotel accommodations to ensure X-rated TV blocked and courtesy bars
locked.
Plan and communicate procedures to guard against drugs, alcohol, and tobacco.
Pick up medication and field trip backpacks from nurse. You will also need to be trained by the
nurse on how to administer any medications.
Chaperone list to principal or principal's designee. Chaperone inputted into the visitor
management system.
Package for each chaperone, to include:
• List of students for which he/she is responsible;
• Typed itinerary;
 Contact phone number for teacher in charge of field trip; and
• Reminder card outlining chaperone responsibilities <i>including</i> hotel responsibilities.
Students instructed to arrange missed work where applicable



the school.

Parent/Guardian Signature

Harford County Public Schools Form 9 Overnight Field Trip Permission Form

Please complete, sign, and return to your child's teacher by INSERT RETURN DATE. My child, _______, has my permission to participate in the field trip to INSERT LOCATION. The nature of the activity includes travel and overnight accommodations, along with INSERT DESCRIPTION OF ACTIVITY. A full itinerary is attached. To travel for this trip, the following means of transportation will be utilized INSERT DESCRIPTION OF ALL TRANSPORTATION. I understand and commit to the costs associated with this trip, which total INSERT FEE, and does not include spending money or incidental costs incurred by my child. In the event of an emergency, please contact me at: HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: In the event you cannot contact me, please contact the following person at the number provided. NAME: PHONE: Health insurance information is required: INSURANCE COMPANY: POLICY HOLDER NAME: _____ IND. POLICY NUMBER: _____ Relationship to Child Parent/Guardian Signature Printed Parent/Guardian Name Date **ACKNOWLEDGEMENT** I understand that my child's participation in this overnight field trip is voluntary and that there are risks involved in this participation that would be present for all types of physical activity. I acknowledge that neither protective equipment, safety rules, nor instruction will prevent all injuries. I will seek to communicate any concerns I have about this trip and ask questions as they arise. I state that I have/my child has read and agree(s) to abide by the terms and conditions set forth in the HCPS policies/procedures, and to abide by all decisions made by teachers, staff, and those in authority. I agree that my child's participation in this trip may at any time be terminated by HCPS in the light of my child's failure to follow these rules, or for any reason deemed to be in the best interest of the safety/security of HCPS students/staff, and that my child may be sent home at my own expense. I understand that if I use my private vehicle to transport my child, I do so at my

Date

own risk. I understand the description of the overnight field trip and financial obligations communicated by



Chaperone Signature

Harford County Public Schools Form 10 (Page 1 of 1) Overnight Field Trip Chaperone Agreement Form

Name (as it appears on Driver's License)	Address	
Trip Destination	Student's Name	
Date(s) of Trip	Student's Classroom/Homeroom Number	
Address	Home Phone Number Cell Phone Number	
RESPONSIBILITIES OF CHAPERONES Congratulations, you have been selected as a field trip chaperone! The role of the field trip chaperone is provide additional support to the instructional team in the supervision of students. Please read the following responsibilities, sign, and return to your child's homeroom teacher by You must agree to: Sign in at school prior to the field trip and sign out prior to leaving the school grounds. Chaperones need to be entered into the Visitor Management System prior to the field trip. If possible, please stop by the school to pre-register, which will save time the morning of the trip. 1. Supervise students and follow the directions of the sponsoring teacher or other school		
3. Report behavior concerns to the responsibility of the chaperon4. Not bring visitors, children, since the second sec	s on the bus(es) as determined by the sponsoring teacher. The sponsoring teacher or other school personnel. It is not the to discipline students at any time. The iblings, or others in your care on the trip. In all scheduled activities. No chaperone may be alone with	
instructional team immediatel the instructional team immediatel 7. Defer to the members of the instruction and the interpretation	nstructional team when making decisions about appropriate n of school policies, rules and procedures. and guidelines for behavior while on school grounds. This	
For this field trip, chaperones: ☐ must provide own transportation, or ☐ will		
I have read the responsibilities of a chaperone ar	nd agree to abide by the established guidelines listed above.	

Relationship to Child



Harford County Public Schools Form 11 (Page 1 of 2) Overnight Field Trip Expectations and Responsibilities

Click or tap here to enter the location of the field trip Click or tap here to enter the date of the field trip

Participation in the Choose a program name program at Choose a school is regarded as a privilege. Students chosen for participation are expected to comply with reasonable rules of conduct. Violation of these rules will result in disciplinary actions, including consequences from school administration upon return. All school policies outlined in the student handbook will be enforced during the entire trip. Additionally, all Choose a program name students must comply with the following guidelines.

Both Student and Guardian must sign below accepting this list of Expectations and Responsibilities.

- 1. If any student is involved in the use of alcoholic beverages, illegal drugs, tobacco products, or breaking of any laws or local ordinances which may result in arrest or detention, it shall be the responsibility of the parent/guardian to come take custody of the student and be responsible for their return home. Administrative action will be taken as outlined in the student handbook.
- 2. Follow all directions from your assigned chaperone. Any disrespectful behavior toward a chaperone will be treated as insubordination and appropriate administrative action will be taken.
- 3. Students are to stay in their own area of the hotel. No wandering around the hotel grounds, pool area, game area, etc. No boys should be in or around the area of the girl's rooms and vice versa. Lights out means lights out, you will need your sleep. We have a long day planned for you, so get a good night's rest.
- 4. Any damage to a hotel room, its fixtures, or contents will be charged to all occupants of the room unless it can be attributed to one or more specific persons. In that event, the damages will be charged to those individuals and their parents. Use of the hotel phone will also be charged to all room occupants.
- 5. It is the responsibility of each member of the room to assist in keeping the room and its contents in respectable order. Only chaperones will handle room keys.
- 6. Our hotel has already been notified that no room service, pay-per-view movies, or long distance phone calls will be allowed in our rooms.
- 7. Be at all places promptly. We do not want the entire group to be waiting for one late person. Early is on time and on time is late!



Harford County Public Schools Form 11 (Page 2 of 2) Overnight Field Trip Expectations and Responsibilities

- 8. Harford County Public Schools will not be responsible for any lost or stolen items during this trip. Please think carefully about bringing any valuables with you. Keep all money and personal belongings with you. Do not leave your wallet, purse, or money lying around your room.
- 9. Cell Phones will be allowed on the trip. Please understand it is your responsibility to secure your cell phone at all times. Bring a cell phone charger with you. There are NO outlets on the bus.
- 10. At no time will a student or a group of students wander off by themselves. A chaperone must accompany individual students or small groups of students if there is the need to be separated from the general group location. We will follow a 3-person buddy system in the Click or tap here to enter text..
- 11. A group is judged very quickly by how they look and what they say. Therefore, we expect you to carry yourself with dignity and maturity at all times. Think about how your appearance, actions, and words reflect on you, your ensemble, and your school.
- 12. Dress requirements Click or tap here to enter any dress requirements.

Student Name:	
Signature:	
Date:	
Guardian Name:	
Signature:	
Date:	