

FIELD TRIP REQUEST FORM

☐ Day Trip, school day ☒ Overnight Trip, 2 Nights
☐ Day Trip, non-school day ☐ Out-of-State Trip, Nights

Date(s) of Trip: Sept 5-7 Alternate(s):
 Periods Off Campus: 2 days Time Leaving: 5 am Return Time: 9 pm
 Destination: Santa Barbara City:

Intermediate destinations, departure, and arrival times, if overnight or out-of-state

Date of Request: # days prior to trip:
 Sponsoring Group: Water Polo School: DRAKE
 Number of Students Participating: 16 Number of Chaperones 4
 Purpose of Trip: Water Polo Tournament

Attach documentation for scheduled events, programs

Swimming included: Yes ☒ No ☐ If yes, complete E(2) 6153

Estimated cost of trip: Cost per student: \$100

Charged to: ☐ School M/E ☐ Student Body ☐ Athletics ☐ Organization budget
☐ Fund-Raising ☒ Student/Parent Contribution

Other:

Mode of Transportation: ☐ Contract bus ☐ Employee car ☒ Volunteer car
☐ Student driven car ☐ Other:

Complete Driver Certification Form E(1) 3541.1

Insurance Coverage Needed:

☐ Day Trip:
 Student insurance for students not covered by their own or parent's insurance, insurance available through the District
☒ Overnight or Out-of-State Trip:
 Extended Short-Term Group Coverage, available through the District
 (See 5142 - Insurance)

Staff Member in Charge, Print Name: MATT SHERMAN
 I have read and will abide by Board policies and regulations pertaining to field trips.
 (cf. 6153 - District-Sponsored Trips)
 (cf. 5142 - Transportation for School-Related Trips)
 (cf. 3541.1 - Insurance)

Signature Matt Sherman
 Principal - Signature [Signature] Date 8/12/19

FIELD TRIP REQUEST FORM - SWIMMING SUPPLEMENT

Type of Facility

☐ TUHSD pool
☐ Other school district pool.
☒ Commercial or public swimming facility

Phone _____

☐ A private pool is being used; certificate of liability insurance for not less than \$1,000,000 has been obtained.

Name of owner: _____

Location of pool: _____

Phone: _____

- ☒ Parents notified and signed permission given.
☒ Swimming ability of staff and students determined.
☒ Lifeguard will be available.
☒ Written instructions on supervision/safety distributed to staff and chaperones.
☒ Provision made for students with varying swimming abilities.
☒ Provision made for flotation devices as appropriate.
☒ A one-on-one system for monitoring will be implemented.
☒ The principal and teacher initiating swim activities have, or will have, visited the site and assessed risks prior to trip.
☒ Written emergency procedures are in place.
☒ A ratio of not less than one chaperone for each 10 students will be maintained.

Staff Member in Charge, signature _____

Principal, signature _____

Date

8/14/19

TAMALPAIS UNION HIGH SCHOOL DISTRICT
 Larkspur, California