

Field Trips
and
Extracurricular Activities
Guidelines and Procedures



September 10, 2019

Revised

Superintendent
E. Wayne Gent

ST. LUCIE PUBLIC SCHOOLS
9461 Brandywine Lane
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The St. Lucie Way (Vision)

St. Lucie Public Schools in partnership with parents and community will become premier centers of knowledge that are organized around students and the work provided to them. The St. Lucie Public School's name will be synonymous with continuously improving student achievement and the success of each individual. Our school district's promise is to move from good to great focusing on our core business, the creation of challenging, engaging and satisfying work for every student, every day. This is the St. Lucie Way!

MISSION STATEMENT

The mission of St. Lucie Public Schools is to ensure all students graduate from safe and caring schools equipped with knowledge, skills, and the desire to succeed.

The core business of St. Lucie Public Schools is to create challenging, engaging and satisfying work for every student, every day.

FIELD TRIPS AND EXTRACURRICULAR ACTIVITIES GUIDELINES AND PROCEDURES

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GENERAL INFORMATION

Academic field trips are defined as a school sponsored excursion from the campus and an extension of a classroom activity to serve as a laboratory experience. The field trip, and activities engaged in during the field trip, should be an extension of classroom instruction. Trips may be scheduled during normal class hours or for periods outside of class, such as weekends. Academic field trips should relate directly to the content of the course or subject. Field trips should expand children's knowledge through hands on, minds on teaching and learning experiences. Clear and specific objectives must be submitted by the person requesting the trip. Care should be taken to limit the duplication of field trips and minimize the loss of regular instructional time.

Academic field trips should include ALL students. No student shall be excluded because of inability to pay. No student shall be excluded without permission from the principal and advance notification to parents. No student shall be excluded because of program placement or disability.

Extracurricular trips are defined as trips which are school sponsored or connected, but which do not necessarily fit the definition of an instructional field trip. Recreational, enrichment, incentive field trips, and other trips not directly related to instruction should be scheduled during non-instructional time. **Authorization will not be granted for trip requests to theme parks on school days during instructional time.**

*Special Note: Fund raising for field trips which require financing should not be undertaken until the request has been approved at all levels. Emergencies do arise; however, careful planning should alleviate the need to begin fundraising before a trip is approved.

ALL FIELD TRIPS (except for Athletics) MUST be submitted via Travel Tracker four to six weeks in advance to ensure use of School Board Buses. Failure to do so within the time frame listed may result in a shortage of driver availability. This window of submission also allows for the requests to receive higher levels of approval (Executive Director, Superintendent, School Board) if needed.

Walking field trips require use of the approved permission slip.

Budgets for athletics, band, and cheerleaders were transferred from the transportation department to specific project budgets at each school beginning in the 2006-07 school year. To enhance budgetary control and site-based management, the budgets have been kept apart using the following project numbers: 2014 = athletic field trips, and 2015 = band/cheerleaders. Cost Strips must be included on all requests, including athletics, band, cheerleaders, parades and festivals transportation. Assistance may be available for festival and parade transport through the Superintendent's Community Service Fund. Approval for use of this fund must be granted through the Director of Transportation's offices. (Please contact these offices in advance to determine availability of funds). We urge all teams/schools with close proximity venues to schedule buses together in order to cut costs.

APPROVAL OF FIELD TRIPS

Sponsors for educational field trips or student travel to approved school activities should first discuss the proposed trip and/or activity with the Principal and obtain approval to proceed with plans for the field trip.

A "Teacher/Sponsor Field Trip Request Form" should be completed for all field trips and submitted to the Principal or designee for approval (schools are no longer required to send the packet to the District. After the request has been approved by principal or designee, it should be entered into the Travel Tracker online system). Local field trips must be approved by the Principal and Executive Director of Schools. Out of district field trips must be approved by the Principal and Executive Director of Schools. Overnight field trips for secondary students must be approved by the principal, Executive Director of Schools and the Superintendent. Overnight field trips for elementary students must be approved by the Principal, Executive Director of Schools, Superintendent, and the School Board. Out of state field trips must be approved by the principal, Executive Director of Schools, Superintendent and the School Board.

PARENT PERMISSION AND STUDENT RESPONSIBILITY

Permission for a student to participate in an educational field trip, or travel as a member of a school class or group to approved off-campus activities, must be obtained from the student's parent or guardian.

Three forms are approved as parent permission forms and should be used accordingly. Copies of all forms may be obtained from the print shop.

1. "Parental Permission Form" (approved by the School Board 6/29/04) - To be used by all classes or groups except band, choral groups, and athletic teams, for each trip or activity.
2. "Medical Release Form for Out-of-County or Overnight Travel" - To be used by groups other than athletics. Each student must complete one form which remains in effect the entire school year unless canceled in writing by the parent or guardian.
3. "Parent and Player Agreement" - To be used by members of athletic teams. Each student must complete one form which remains in effect the entire school year unless canceled in writing by the parent or guardian.

In addition to either the "Parental Permission Form" or "Medical Release Form for Out-of-County or Overnight Travel," any trip, or extracurricular activity, involving experiential education or adventure-based activity where the student will participate voluntarily in any physical activity that includes the risk of exposure to hazards that could result in serious injury or death, the form **"FULL AND COMPLETE WAIVER AND RELEASE OF LIABILITY"** should be obtained from the student's parent or guardian.

The following are some examples of trips and activities that require the form **"FULL AND COMPLETE WAIVER AND RELEASE OF LIABILITY."** For assistance in determining use of this form, contact Risk Management. This list is intended to be illustrative, not exhaustive:

- | | | |
|--------------------------------|---|--|
| <input type="radio"/> sea camp | <input type="radio"/> physical activity | <input type="radio"/> hands-on environmental |
| <input type="radio"/> water | <input type="radio"/> physical exercise | <input type="radio"/> clubs involving physical |
| <input type="radio"/> obstacle | <input type="radio"/> rope course | |

SCHOOL BUS FIELD TRIP PROCEDURES

Guidelines for Use of School Board Buses

The use of School Board buses for field trips is extremely limited. Approved trips must:

1. Be taken between the hours of 9:45 a.m. and 12:45 p.m. Monday through Friday.
2. Be within the Treasure Coast area (St. Lucie, Martin, Indian River, Palm Beach, Brevard and Okeechobee Counties).
3. Be academic. Specific objectives that correlate with the common core standards / Next Generation Sunshine State Standards (NGSSS), match the grade level's scope and sequence, and are integrated with a program of instructional study must be approved by the Principal or designee and submitted to the appropriate Executive Director of Schools via the Travel Tracker online system.

Trips that meet these guidelines will be approved on a first come, first served bus availability. Requests to use School Board buses for trips to theme parks will NOT be approved.

***Special Note:** During the 2019-2020 school year, principals are requested to work with staff to develop a list of appropriate field trips for each grade level. The agreed upon list should eliminate duplication of field trips across grade levels, minimize the loss of regular instructional time, and minimize costs for students.

Request Procedures

Bus Trip Requests must be made on the Travel Tracker system. You must register on the system the first time you use it. The link to Travel Tracker is on the Employee tab of the District webpage. If you need assistance, you may e-mail Larry Petruff (george.petruff@stlucieschools.org) or Debbie Soesbe (deborah.soesbe@stlucieschools.org) for the link.

You will need your school e-mail address and a password to register on the system. Both requesters and approvers will need to have logins to access the system. If you have trouble registering or logging in, please call Travel Tracker Support at 800-425-0720.

For Travel Tracker training, please click on Support/Training Links in the upper right corner of the Main tab to view training videos or call Transportation at (772) 340-7186 for assistance.

Please note the following:

- A cost strip is required for ALL trips at the time of input. Requests will not be processed without a cost strip. Requests to charge field trips to any cost strip other than the school's general 10100 account must be approved by Accounting. Requests without cost strips or required information for outside agency billing will default to the school's general fund 10100 account.
- After a request is inputted, an e-mail will be sent to the designated "approver" for your school. The approver must sign on to the system under their e-mail and click the radio button to approve the trip.
- Once the trip is approved by the appropriate Executive Director, the request is electronically transmitted to the Transportation Department for bus and driver

assignment. At this point, the system will not allow a requester or approver to make changes after the trip has been fully approved. You must contact Transportation field trip staff via e-mail or phone for any changes that need to be made.

- Any additional or helpful information for the driver or Transportation staff should be placed in the Comments section at the top of the Travel Request.
- If a lift-equipped bus is required on any field trip, this **MUST** be noted on the Trip Request form. You must indicate the number of wheelchairs that will be transported, car seats, harnesses, and any other special equipment in the Vehicles Needed section.
- While the Travel Tracker system may ask you the number of buses needed, Transportation staff will ultimately determine the number of buses required based on your answers to the questions in reference to numbers of students and adults, as well as any equipment needs.

Accurate information on the departure time and the number of passengers is required. Reporting time at the school may be requested up to 30 minutes prior to departure to allow for loading equipment, uniforms, and students, and should be indicated in the Comments section. Do not overestimate the number of passengers. The number of passengers should include students and coach/sponsor, and chaperones. At the time of loading, a list of all passengers should be given to the driver(s). Any changes to student counts need to be submitted to us at least 48 hours prior to date of trip.

Cancellations/No Shows

Trip cancellations and/or rescheduled trips should be made at least 24 hours in advance. **The trip should be cancelled or rescheduled using the Travel Tracker system.** The school requesting the trip will be charged a \$50.00 cancellation fee per bus for any trip which is not cancelled at least 24 hours in advance, to cover payment to the driver as required by union contract. Exceptions may be made for weather, or other reasons outside the school's control.

Lack of Available Buses

All field trip requests are expected to have **all levels of approval at least 14 days in advance** to ensure scheduling. Should there be too many requests for field trips on a given day; the requests will be filled in the order in which they are received. The requesting sponsor will be notified as early as possible that an alternate form of transportation must be arranged. Transportation staff will attempt to combine trips when possible to allow all students to participate if buses and/or drivers are not available.

Time of Trips

Field trips may be scheduled for a 9:45 a.m. departure and a 12:45 p.m. return. No transportation will be available outside of these times. If you schedule field trips outside of these times, you will need to secure transportation through one of the approved charter companies from the Purchasing department. Because regular drivers are scheduled for daily PM routes, they are on a tight time-schedule for returning to school. All students must be loaded and ready to return in order to arrive back at their campus no later than 12:45 p.m. The driver will supply the sponsor with a boarding time for the return. This time must be adhered to in order to assure returning to the school on schedule.

Driver Instructions for Waiting

Drivers will be instructed to wait no more than 15 minutes at the school after the scheduled departure time. If the students are not boarding by this time, the driver will notify Dispatch and return to the Transportation Compound. A no-show/non-cancellation fee of \$50.00 will be charged for all buses requested, in addition to round trip mileage from the compound where the bus originated.

Tolls, Parking, Maps and Directions

It is the trip sponsor's responsibility to provide directions to the driver for reaching the destination prior to departure. Please be sure you know where you are going **BEFORE** you leave town so that you can obtain directions. It is the sponsor's responsibility to cover all parking costs and tolls. Drivers are **NOT** responsible for parking costs or tolls. If a teacher/chaperone requests the driver to take a toll route, the teacher/chaperone ***must*** have SunPass, EZ Pass or cash, or the driver will take a non-toll route. Non-toll routes may require more time and mileage, so please check in advance as we may need to adjust time of departure. Unattended toll booths require SunPass or EZ Pass, and drivers may not run tolls.

Breakdowns

Every effort is made by our fleet maintenance department to ensure that all buses are roadworthy and ready to be taken out of town at any time.

In the event of a breakdown or needed repairs while on the road, the bus driver will call the Field Trip and Activities personnel who will contact the appropriate mechanic. If you are out- of-district, a list of local district mechanics who are on duty to handle road emergencies **will be called. Every effort will be made to minimize the time you are inconvenienced. Emergencies should be directed to G. Larry Petruff at (772) 216-6420. When buses break down, please remind parents that they may not transport children other than their own. Mandates regarding the Jessica Lunsford Act and prior parental consent prevent us from authorizing parents to transport students when buses break down.**

Gas Cards

The Director's secretary has a sign-out procedure for drivers to obtain fuel credit cards. The cards must be obtained by the driver at least one day prior to the trip. The cards may not be used for any purchase other than fuel for district-owned buses. The cards must be returned to the secretary with signed charge slips indicating mileage, bus number, date and driver name for proper accounting.

School Bus Field Trip Rates

The rate for school bus transportation is as follows:

- \$1.50 per mile round trip from the closest bus compound using Google Maps:
 - North Compound – 601 S. 29th St., Fort Pierce 34947
 - South Compound – 325 NW Commerce Park Dr., Port St. Lucie 34986
- \$35.00 per hour for driver time. Allow approximately one extra

hour to your estimated trip time for pre-trip safety inspection, fueling the bus, driver time from their last drop location or compound to and from your school, and sweep time.

- If a bus aide is required to accompany a special needs student (wheelchair or other qualifying condition), then the aide will be billed to the school at a rate of \$15.00 per hour.
- Estimated total charges can be obtained on the trip request, or by e-mailing the field trip coordinator.
- For out-of-county trips, drivers will submit an Out of District Travel Expense Report (FIN0023) within one week of the completion of the trip
- for meal reimbursement that will be charged to the school. Transportation employees are eligible for meal allowances per Union agreement, and according to SLCPS Policy 7.52. To avoid being billed for meals, a meal must be offered to the driver/aide and indicated in the appropriate location on the field trip ticket. The meal may be the same as packed for others on the trip, or a purchased one, at the school's discretion. The employee may decline the offer if they so choose but will forfeit the allowance as long as the offer is documented on the trip ticket. If a driver is not offered a meal, but is eligible under the Policy, the trip ticket must indicate NO that a meal was not offered in the appropriate place at the bottom and be signed by the teacher/chaperone.
- Transportation must be notified by school staff immediately of any changes to personnel with respect to entering and approving trip requests and paying invoices.

Schools will be billed by monthly invoices. After five days, during which schools may dispute billings, the invoices are sent to the Finance Department for processing deductions from applicable school accounts. Hard checks are no longer to be sent to the Transportation Department; instead checks should be deposited into the appropriate school account listed as the cost strip on the trip request.

Overnight Field Trips

All field trip requests requiring overnight stays must include a complete itinerary of activities and directions to the location. Advance arrangements to cover the cost of hotel/motel rooms, toll costs, and meals on a field trip requiring an overnight stay shall be made by the sponsor for the bus driver. Driver gender may not be requested due to union contract.

Field Trip Lunches

Field trip lunches may be ordered in advance for any student or adult from the school cafeteria. Students and adults will be charged their regular lunch price for field trip lunches. Lunches will be packed in coolers and available for pick up on the day of the field trip. Field trip lunches should be requested using the Field Trip Lunch Request Form (FOS0015) and returned to the school cafeteria manager at least two (2) weeks prior to the trip. The Field Trip Request Form is available online and can also be secured from the Cafeteria Manager. Space for coolers for lunches should be taken into consideration when passenger counts are entered.

Food and Drink on the Bus

There are occasions when students and sponsors will want to stop for food while on out of town trips. Due to the safety hazards and insect problems which have resulted from this practice, students are encouraged not to eat or drink on the bus. Exceptions can be made by the sponsor for long trips. If excessive damage or dirt and trash from spilled food and

drink occur, the school will be charged a fee for the clean-up service. The school principal will be contacted and the matter resolved. A fee may be required where appropriate.

Sponsors

One or more sponsors are required on all field trips. Sponsors are required to ride on the bus and assist with passenger management to and from the event. Each field trip sponsor is required by School Board Policy to carry documentation of emergency contact information. The sponsor is to notify the school (principal) and the parent in the event a student is injured. Teachers/sponsors going on field trips must be trained to give medications if they have a student with med orders (EpiPens, diabetic care, etc.). Policies and procedures for medication administration on field trips should comply with policies and procedures for medication administration on school campuses. The Health Department nurse will assist in this training provided she is given adequate notice (not the morning of the field trip). The sponsor should remain with students until all have been released to a parent or guardian.

Unscheduled Stops

Unscheduled stops (except in emergencies) are not allowed. The return to the school will be the final stop. Students are not to be delivered to their home, but taken back to the school. Special considerations will be made and subject to a fee.

School Bus Capacities

Transportation staff will determine the number of buses needed based on your responses to questions on the trip request. Here are the guidelines used to provide a safe, comfortable ride for everyone. Three students per seat for elementary grades Pre-K to 3, two students per seat for grades 4 – 12, and one adult per seat. Below is an estimate of passengers allowed per bus. Please deduct three students for each adult rider.

Bus capacity on In-County trips

For large capacity buses – approximately 77 passengers for elementary grades Pre-K to 3, and 65 passengers for middle- and high-school.

For standard capacity buses – approximately 65 passengers for elementary grades Pre-K to 3, and 44 passengers for middle- and high-school.

Bus capacity on Out-of-County trips – 52 total passengers for large capacity buses, and 44 total passengers for standard buses.

Federal Motor Carrier (Charter Bus) Procedures

Charter buses may be necessary when school buses or drivers are not available. Schools may request the use of charter buses for out-of-town trips. Schools will be responsible for

obtaining and paying for charter bus rentals.

Private Vehicles

The use of private vehicles for educational field trips or transportation for school-sponsored groups is discouraged. However, prior to using a private vehicle to transport students, should it become necessary, the principal shall:

1. Verify that the driver of the vehicle is an adult and has a valid Florida driver's license.
2. Require the owner to show evidence of insurance in force on the vehicle prior to and during the time it is used to transport students. Minimum limits of \$100,000 per person, \$300,000 per accident for bodily injury, and \$50,000 property damage.
3. Verify and keep on file the owner's insurance information on the form "Statement of Insurance on Private Vehicles."

Private vehicles which may not be used by schools to transport students to school-sponsored events are pleasure vans, mini vans registered as vans, and four-wheel drive vehicles. Fifteen passenger vans may not be used.

Note: When the transportation of students is necessary or practical in a motor vehicle owned or operated by a school board other than a school bus, such transportation must be provided in designated seating positions in a passenger car not to exceed 8 students or in a multipurpose passenger vehicle designed to transport 10 or fewer persons which meets all applicable federal motor vehicle safety standards. Multipurpose passenger vehicles classified as utility vehicles with a wheelbase of 110 inches or less which are required by federal motor vehicle standards to display a rollover warning label may not be used.

When students are transported in motor vehicles, the occupant crash protection system provided by the vehicle manufacturer must be used unless the student's physical condition prohibits such use. FS 2000-313 Section 2 (1) (d)

Transportation Telephone List

Field Trip Office Hours 7:00 a.m. to 5:00 p.m.

Dispatch Hours: 4:00 a.m. to 6:00 p.m.

Transportation Department Main Number:
(772) 204-RIDE (7433)

G. Larry Petruff, Field Trip and Activities Manager

Office: (772) 344-4497 Cell: (772) 216-6420

email: george.petruff@stlucieschools.org

or

Debbie Soesbe, Field Trip Clerk

(772) 340-7186

Email: deborah.soesbe@stlucieschools.org

Field Trip Office Fax: (772) 340-7125

Dispatch Office:

South Compound 785-6618 or 785-6615

After 6:00 p.m. and on Weekends,

Field Trip Manager (or person on duty) Cell Phone: (772) 216-6420

Breakdowns: Fleet Manager Mark Cochenour @ (772)-216-0126

If no answer, you may call Coordinator Jimmy Hardison @ (772)-370-0787 or Director Jacanti Ephrom @ (772) 200-6539

CHAPERONES

All educational field trips and other school sponsored student travel must be adequately supervised and chaperoned by a faculty member. A certified faculty member will be designated as sponsor, and other staff members or parents designated as chaperones (as defined by School Board Policy 4.44) and approved by the principal. The number of chaperones will be based on the number of students participating and the specific needs of the trip.

For trips that extend outside the regular school hours, the supervising teacher is responsible for students until they are released to parents.

ITINERARY

An itinerary of the trip activities must be filed in the principal's office by the sponsor or sponsoring organization. Two (2) school contact persons, not making the trip, must be identified for parents, with each contact person's phone number in order to respond to calls or questions concerning the trip. Parents must be provided the name and telephone numbers of the two contact persons. A list of students not attending the field trip and their physical locations on campus (if applicable) must be left with the principal or his/her designee.

ACCOMMODATIONS

All arrangements for accommodations while on an educational field trip or school-sponsored student travel must be reviewed and approved by the principal/designee before travel begins. The Florida High School Activities Association hotel/motel reports are to be submitted by the sponsor at the conclusion of the trip as it applies.

COST OF THE TRIP

Provision must be made for all students who are unable to pay. Consideration of ability to pay must be given in order that field trips do not become a financial burden on parents.

It is recommended that teachers take advantage of local opportunities for field trips. Souvenir shopping is strongly discouraged. District and school procedures must be followed for collecting money and drafting checks.

INSTRUCTIONAL OBJECTIVE

An educational field trip is an extension of the classroom and regular classroom instruction.

Specific instructional objective(s) should be included in planning the activity since approval is based largely on the educational benefit to the students participating in the field trip. Consideration must also be given to students keeping up with instruction in other classes and making up work missed as a result of participation in the field trip.

Where possible, trips should be scheduled without loss of school time; i.e., student holidays, weekends, spring vacation, or during the summer vacation. In the event a trip would require students to be absent from school for more than a day, the trip must be approved by the principal or designee, the Executive Director of Schools, and the Superintendent.

Overnight field trips for elementary students are strongly discouraged; however, all overnight field trips by elementary school students must be approved by the School Board. Before school approval is granted, the following should be considered:

1. Costs of an overnight trip are greater as additional meals and sleeping accommodations become necessary.
2. Supervision responsibility of chaperones increases greatly when the field trip extends beyond the school day.

ESCUELAS PÚBLICAS DE ST. LUCIE
Fort Pierce, Florida

Formulario de Permiso para Viajes Escolares

Nosotros los padres de _____, referido como “estudiante” le damos autorizacion para que participe en el viaje escolar auspiciado por la escuela a _____.

Los estudiantes seran acompanados por su maestro/maestra. Los estudiantes saldran de la escuela _____ a las _____
Dia Hora
y regresaran a a las _____.
Hora

Mi hijo/hija entiende que el/ella debera seguir las reglas y regulaciones de la Asociacion de Actividades de la Escuela Secundaria asi como las del Sistema Escolar del Condado de St. Lucie.

Yo autorizo a la escuela que obtenga cuidados medicos para el estudiante de ser necesario en caso de emergencia durante la actividad o el viaje escolar.

Firmado el _____ de _____, 20 _____.

Firma del Padre/Guardian

(Numero de Telefono)

(Si el formulario de permiso es firmado por otra persona que no son los padres, el que firme debe de identificar su relacion con el estudiante.)

Aprobado por la Escuela del Condado: 29 de Junio de 2004

OPE0002B
Rev. 09/14

ÉCOLES PUBLIQUES DE ST. LUCIE
Fort Pierce, Florida
FÒM PÈMISYON PARANTAL

Nou, ki siyen anba-a ki se paran de _____, ki apati de jodi-a yo refere kòm “elèv-la” bay pèmisyon pou-l pran pa nan pwomnad ke lekòl-la anchaj nan: _____.

Elèv-yo pral akonpaye de pwofesè-yo. Elèv-yo pral kite lakou lekòl-la _____ a _____ epi retounen _____.

Dat

Lè

Lè

Pitit mwen-an konnen ke-l dwe suiv lwa ak regleman-yo de Sistèm Lekòl nan Kanton St. Lucie.

Mwen otorize lekòl-la pou obteni, atravè yon doktè li ta chwazi nenpòt swen medikal emèjensi ki ta nesèsè pou elèv-la pandan aktivite-yo oubyen diran pwomnad-la.

Date nan _____ jou de _____, _____.

(Siyati Paran/Gadyen)

(Telefòn)

(Si moun ki siyen pèmisyon-an se pa paran elèv-la, li ta dwe idantifye relasyon-l avèk elèv-la.) Apwouve pa Depatman Edikasyon:

OPE0002C
Rev. 09/14

ST. LUCIE PUBLIC SCHOOLS
STATEMENT OF INSURANCE ON PRIVATE VEHICLES

Required by State Statute 234.03(4)

School Year: _____

The School Board of St. Lucie County, Florida, requires proof of insurance coverage in force on all private vehicles, prior to and during their use for the transportation of school sponsored groups on all in-county and out- of-county trips. **The minimum limits of coverage are \$100,000 per person, \$300,000 per accident for bodily injury, and \$50,000 property damage.** The groups being transported include, but are not limited to, students, coaches, sponsors, faculty and chaperones.

This form is to be completed for each private vehicle used and is valid for the school year in which filed. If the insurance policy expires or is canceled during the school year, a new statement must be submitted.

SCHOOL _____ DATE _____

DRIVER'S NAME _____ AGE _____

DRIVER'S FLORIDA OPERATOR'S LICENSE NUMBER _____

FLORIDA VEHICLE INSPECTION EXPIRATION DATE _____

This is to certify that insurance policies, subject to their terms, conditions and exclusions, are at present in force with the company indicated.

NAME OF INSURED/S _____ POLICY NUMBER _____

INSURANCE COMPANY _____

VEHICLE MAKE _____ YEAR _____ MODEL _____

Policy Period From _____ To _____ Identification No. _____

and that the same provides for Personal Injury Protection in a sum of not less than \$10,000.

INSURANCE AGENT _____

ADDRESS _____ TELEPHONE _____

I certify that the above information is correct:

Signature of Owner Date

I have verified the above information:

Principal's Signature or Designee Date

SEC0032
Rev. 9/14

ST. LUCIE PUBLIC SCHOOLS
MEDICAL RELEASE FORM FOR OUT-OF-COUNTY OR OVERNIGHT TRAVEL
FOR BAND, CHEERLEADING AND OTHER NON-ATHLETIC EVENTS

School Year _____

Name of Student (Please print) _____

Address _____

Home Phone _____ Date of Birth _____ Place of Birth _____

Parent's work phone _____ Other Emergency Phone _____

This application to travel and participate in activities or events sponsored by St. Lucie Public Schools is entirely voluntary on our part and is made with the understanding that we have not violated any of the eligibility rules and regulations of St. Lucie Public Schools. It is also agreed that we will abide by all the rules set down by the School Board of St. Lucie County, and the school.

The School Board of St. Lucie County, and its school principals and teachers, desire that students and parents or guardians of students have a thorough understanding of the implications involved in a student participating in a voluntary extracurricular activity. For this reason it is required that each student in the St. Lucie County schools, his/her parent, parents, or guardian, read, understand, and sign this agreement prior to the student being allowed to participate in any out-of-county or overnight school trip.

1. I/We, the undersigned, as parent, parents, or guardian, give my/our consent for the student identified herein to participate in this activity as a representative of his/her school.
2. I/We, will not hold the School Board of St. Lucie County, anyone acting in its behalf, or the Florida High School Athletics Association responsible or liable for any injury occurring to the named student in the course of such activities or such travel.
3. I/We understand that school officials will complete required accident insurance forms, after which all claims under insurance policy, or policies, for injuries received while participating in school events, shall be processed by the student, his/her parent, parents, or guardian, through the company agent handling the student's insurance policy, and through the school officials.
4. I/We hereby accept financial responsibility for equipment or instruments lost by the student identified herein.
5. I/We authorize the school to transport and to obtain, through a physician or its own choice, any emergency medical care that may become reasonably necessary for the student in the course of such activities or such travel. I/We also agree that the expenses for such transportation and treatment shall not be borne by the school district or its employees.
6. I/We accept full responsibility and hereby grant permission for my son/daughter to travel on any approved school related trip. This statement remains in effect until the end of this school year unless canceled by me in writing to the school.

-----Acknowledgement of Parent/Guardian Signature-----

Print Parent/Guardian Name _____ Date _____

Sign Parent/Guardian Name (in presence of Notary) _____

STATE OF FLORIDA
COUNTY OF ST. LUCIE

The foregoing instrument was acknowledged before me this _____ day of _____, _____, by _____ He/She is ___ personally known to me, or ___ has produced _____ as identification, and ___ did ___ did not take an oath.

(NOTARY SEAL) My Commission Expires _____

Notary Public State of Florida _____
Print Notary Name _____

Rev. 03/15
SEC0023A

ESCUELAS PÚBLICAS DE ST. LUCIE
RELEVO MEDICO PARA EVENTOS FUERA DEL CONDADO O DE ESTADIA NOCTURNA
PARA DE BANDA, CHEERLEADING Y OTROS EVENTOS NO-ATLETICOS

Año Escolar _____

Nombre del Estudiante (Letra de Molde) _____

Dirección _____

Núm. Teléfono _____ Fecha de Nacimiento _____ Lugar de Nacimiento _____

Núm. Trabajo _____ Núm. Emergencia _____

Esta solicitud de gira y participación en actividades y eventos auspiciados por las escuelas Publicos de St. Lucie es enteramente voluntaria de nuestra parte y es completada con el entendimiento de que no hemos violado ninguna de las reglas y regulaciones de elegibilidad de las Escuelas Publicos de St. Lucie. Además, está acordado que cumpliremos con todas las reglas establecidas por el Distrito Escolar Publico de St. Lucie, y la escuela.

El Distrito Escolar del Condado de St. Lucie, sus principales y maestros de escuela, desean que los estudiantes y padres o guardianes de los estudiantes entiendan completamente las implicaciones envueltas en la participación del estudiante en una actividad extracurricular voluntaria. Por esta razón es requerido que cada estudiante en las escuelas Condado de St. Lucie, sus padres o guardianes, lean, entiendan y firmen este acuerdo antes de que el estudiante sea permitido participar de cual gira fuera del condado o de estadía nocturna.

1. Yo/Nosotros, bajo firmante(s), como padre, los padres, o el guardián, doy/damos mi/nuestro consentimiento para que el estudiante mencionado arriba tome parte en esta actividad como un representante de su escuela.
2. Yo/Nosotros, no haremos al Distrito Escolar del Condado de St. Lucie, a cualquiera que actúe en nombre del condado, ni a la Asociación Atlética de Escuela Secundaria de la Florida, legalmente responsables por cualquier herida que pueda recibir el estudiante mencionado en el curso de tales actividades o viaje de estadía nocturna.
3. Yo/Nosotros entendemos que los oficiales escolares completarán las formas de seguro de accidente requeridas, las cuales luego serán reclamadas por el estudiante, el padre, los padres, o el guardián, bajo la póliza o pólizas de seguros, por las heridas recibidas mientras participaban en los eventos escolares, a través de la compañía agente encargado de la póliza de seguro del estudiante, y a través de los oficiales escolares.
4. Yo/Nosotros aceptamos la responsabilidad financiera por equipo o instrumentos perdidos por el estudiante mencionado.
5. Yo/Nosotros autorizamos a la escuela a transportar y obtener, a través de un médico u otra opción, cualquier cuidado de emergencia médica que sea racionalmente necesaria para el estudiante en el curso de dichas actividades o viaje de estadía nocturna.
6. Yo/Nosotros aceptemos completa responsabilidad y por lo tanto otorgamos permiso para mi hijo/hija viaje en cualquier gira escolar aprobada. Esta declaración se mantendrá en vigencia hasta el final del año escolar a menos que sea cancelado por escrito a la escuela por mi/nosotros.

----- **Reconocimiento de la firma del padre/tutor** -----

Escriba el nombre del padre o tutor _____ Fecha _____

Firmar el nombre del padre o tutor (en presencia de notario) _____

ESTADO DE LA FLORIDA
CONDADO DE ST. LUCIE

El instrumento anterior reconoció ante mí este _____ día del mes _____, _____, por _____ . El/Ella es ___ conocido personalmente por mí, o ___ ha producido _____ como identificación, ___ presto ___ no presto juramento.

(SELLO DEL NOTARIO) Mi comision expira _____

Notario público estado de la Florida _____

Imprimir nombre del Notario _____

Rev. 03/15
SEC0023B

ÉCOLES PUBLIQUES DE ST. LUCIE
FÒM RELIS MEDIKAL POU VWAYAJE ANDEYÒ KANTON-AN OUBYEN PASE NWIT
POU BAND, "CHEERLEADING" AK LÒT EVÈNMAN KI PA ATLETIK

Ane Eskolè _____

Non Elèv-la (Tanpri printe) _____

Adrès _____

Telefòn Lakay _____ Dat de Nesans _____ Plas de Nesans _____

Telefòn Travay Paran-l _____ Lòt Telefòn Emèjensi _____

Aplikasyon sa-a pou vwayaje ak patisipe nan aktivite oubyen evènman-yo ke lekòl-yo nan Kanton St. Lucie anchaj antyèman volontè nan bò pa-ou epitou li te fèt avèk konpreansyon ke nou pa viole okenn lwa ak regilasyon elijibilite-yo de lekòl-yo Publique de St. Lucie. Nou tonbe dakò tou ke nou pral konfòme a tout lwa-yo ke Depatman Edikasyon Publique de St. Lucie ak lekòl-yo mete sou plas.

Depatman Edikasyon nan Kanton St. Lucie, ak direktè lekòl-yo ak pwofesè-yo desire ke elèv ak paran-yo oubyen gadyen de elèv-yo gen yon konpreansyon absoli de enplikasyon-yo ki atache nan yon elèv k-ap patisipe nan yon aktivite "extra curricular" volontèman. Pou rezon sa-a yo mande ke chak elèv nan lekòl Kanton St. Lucie, paran-l, oubyen gadyen-l, pou li, konprann, epi siyen akò sa-a avan pou yo pèmèt elèv-la de patisipe nan nenpòt pwomnad andeyò kanton-an oubyen pou pase nwit.

1. Mwen/Nou, ki siyen anba-a, kòm paran, paran-yo, oubyen gadyen, bay konsantman pou elèv-la ki idantifye nan fòm sa-a pou patisipe nan aktivite sa-a kòm yon reprezantan de lekòl-li.
2. Mwen/Nou, pa pral kinbe Depatman Edikasyon nan Kanton St. Lucie, nenpòt moun k-ap aji nan interè-l, oubyen Asosiyasyon Atletik Lekòl Segondè Eta Florida responsab oubyen koupab pou nenpòt domajman ki ta rive a elèv-la okou de tèt aktivite oubyen tèt vwayaj.
3. Mwen/Nou konprann ke anplwaye lekòl-la pral konplete fòm asirans aksidan ke yo mande, aprè sa tout reklamasyon anba asirans pou domajman ke elèv-yo resevwa tandiske y-ap patisipe nan evènman lekòl-yo, pral antame pa elèv-la, paran oubyen gadyen-l, atravè de ajan konpayi ki pran swen polisi asirans elèv-la, epitou atravè de anplwaye lekòl-yo.
4. Mwen/Nou asepte responsabilite finansyèl pou ekipman oubyen enstriman ke elèv ki idantifye nan fòm sa-a pèdi.
5. Mwen/Nou otorize lekòl-la pou transpòte epitou obteni, atravè yon doktè li ta chwazi, nenpòt swen medical emèjensi ki kapab vini rezonabman nesèsè pou elèv-la okou de tèt aktivite oubyen tèt vwayaj. Mwen/Nou dakò tou ke depans-yo pou tèt transpòtasyon ak tretman pa pral tonbe sou do distrik lekòl-la oubyen sou do anplwaye-l.
6. Mwen/Nou asepte responsabilite total epitou bay pèmision pou pitit mwen-an de vwayaje nan nenpòt pwomnad ke lekòl-yo apwouve. Deklarasyon sa-a ap rete an plas jiska lafen ane eskolè sa-a amwenske mwen anile a lekri a lekòl-la.

----- Pwosesis de rekonesans ke siyati paran/gadyen -----
Enprime paran/gadyen non _____ Dat _____

Siyen non paran/gadyen (nan prezans notè) _____

ETA FLORID ETA DE SAINT LUCIE

Enstriman qui a te rekonèt devan je m' sa a _____ jou _____, _____, pa _____, Li se _____ pèsònèlman ke yo konnen m', ni _____ ki te prodwi _____ kòm idantifikasyon, ak _____ te fè _____ pa t' yon ve.

(NOTÈ SO) Komisyon an mwen fini _____

Eta Florid notè piblik _____

Notè ekri non _____

Rev. 03/15
SEC0023C

**ST. LUCIE PUBLIC SCHOOLS
PARENT AND PLAYER AGREEMENT, PERMISSION, AND RELEASE**

Name of Student Athlete (Please print) _____

Home Address _____

Home Phone _____ Date of Birth _____ Place of Birth _____

Parent/Guardian Work Phone _____ Other Emergency Phone _____

School _____ Grade Level _____ Sport(s) _____

I/We, the undersigned parent(s)/Guardian(s) of the above named student (Student Athlete), acknowledge that competing in interscholastic athletics in the St. Lucie County Schools is entirely voluntary and subject to the eligibility rules and regulations of the Florida High School Athletic Association. I/We further acknowledge that we have not violated and in the future will abide by all the rules set down by the School Board of St. Lucie County, the Florida High School Athletic Association and the school in which the Student Athlete is enrolled (School). All infractions of the Code of Student Conduct shall be reported to school administration. All infractions are subject to the appropriate Discipline Response as defined in the The School Board of St. Lucie County Code of Student Conduct.

Student Athletes and parents or guardians of Student Athletes should have a thorough understanding of the responsibilities and implications of participating in a voluntary extracurricular activity. For this reason, each Student Athlete in the St. Lucie County Schools and his/her parent(s), or guardian(s), shall read, and sign this agreement, permission, and release prior to the Student Athlete being allowed to participate in any form of athletic practice or contests.

I/We, the undersigned Parent(s)/guardian(s) of the above name Student Athlete:

1. Understand that I must complete the FHSAA Pre-participation Physical Evaluation and the FHSAA Consent and Release of Liability Certificate in order to participate as a student athlete in St. Lucie County
2. Understand that only a supplementary insurance premium for the Student Athlete is to be paid from school board funds. This insurance will have a \$500.00 deductible. This deductible will be applied concurrent with primary coverage which will be paid at 100% Reasonable and Customary. If there is no primary coverage, this insurance will pay 100% of Reasonable and Customary after the \$500.00 deductible.
3. Understand that in the event of accident or injury, only School required accident forms will be completed by School officials, and that all claims under any applicable insurance policy for injuries received while participating in athletic activities or travel incidental to such activities shall be processed by the Parent(s)/guardian(s) or the Student Athlete through the company agent handling the Student Athlete's insurance policy, and **not** through School officials.
4. Understand that a **ONE HUNDRED DOLLAR (\$100.00) NON-REFUNDABLE PROCESSING FEE** will be due upon my selection to the team and must be paid before participation in any competitions. I also understand that additional fees may be assessed to participate in a specific sport due to financial limitations and the uncertainty of financial times.
5. Understand that an official St. Lucie County School Board Receipt will be given for all fees paid to the school for athletic purposes.
6. Accept financial responsibility for any athletic equipment lost by the Student Athlete.
7. Understand that if the behavior of this student athlete results in a fine being imposed by the FHSAA, that the fine will be assessed to the student and must be paid prior to further participation. Minimum fine for gross unsportsmanlike conduct is \$250.00
8. Authorize the School to transport the Student Athlete and to obtain, through a physician of the School's choice, any emergency medical care that may become reasonably necessary for the student in the course of athletic activities or travel incidental to such activities; and agree that the expenses for such transportation and treatment shall not be borne by the School Board or its employees.
9. Accept full responsibility and grant permission for the Student Athlete to travel on any trips including overnight trips approved the school's principal.

10. Consent to the release of educational records relating to the student's name, date of birth, and eligibility for athletics to the Florida High School Athletic Association and its service provider C2C Schools, Inc. for the purpose of reporting eligibility to participate in athletics and authorize the release of student transcripts to colleges or their representatives for recruiting purposes.
11. Consent to the release of the student's name, photo, voice, video, height, weight, name of school attending, grade level, and athletic position and statistics for public access, including but not limited to, inclusion on District and school websites and broadcasts and in athletic programs.

NOTICE TO PARENTS/GUARDIANS OF MINOR CHILD PARTICIPANTS

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE SCHOOL DISTRICT OF ST. LUCIE COUNTY, ITS OFFICERS, DIRECTORS, EMPLOYEES, AND AGENTS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ST. LUCIE COUNTY SCHOOL DISTRICT IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE ST. LUCIE COUNTY SCHOOL DISTRICT HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I/WE, THE UNDERSIGNED PARENT(S) AND STUDENT ATHLETE ACKNOWLEDGE HAVING RECEIVED AN ADEQUATE OPPORTUNITY TO REVIEW THIS AGREEMENT, PERMISSION, AND RELEASE AND TO ASK QUESTIONS OF SCHOOL OFFICIALS. I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT; THAT I AGREE TO ITS TERMS; THAT I WILL COMPLY WITH ALL SCHOOL BOARD AND STATE ASSOCIATION RULES. IT IS UNDERSTOOD THAT THE STUDENT ATHLETE IS REQUIRED TO COMPLY WITH ALL SAFETY RULES AND INSTRUCTIONS PROVIDED WITH EACH SPORT, COMPETITION, AND PRACTICE WHILE ENGAGING IN SUCH ACTIVITIES.

I/WE UNDERSTAND THAT PARTICIPATION IN INTERSCHOLASTIC ATHLETICS IS A PRIVILEGE. FURTHERMORE, I/WE UNDERSTAND THAT THE PRINCIPAL OR DESIGNEE HAS THE SOLE DISCRETION TO WITHDRAW MY ELIGIBILITY AT ANY TIME DUE TO AN ON-CAMPUS OR OFF-CAMPUS BEHAVIOR THAT IS DEEMED BY THE PRINCIPAL OR DESIGNEE TO BE UNBECOMING OF A STUDENT ATHLETE.

-----**Acknowledgment of Parent/Guardian Signature)**-----

Print Parent/Guardian Name _____ Date _____

Sign Parent/Guardian Name (In presence of Notary) _____

STATE OF FLORIDA
COUNTY OF ST. LUCIE

The foregoing instrument was acknowledged before me this _____ day of _____, _____, by _____ He/She is _____ personally known to me, or _____ has

produced _____ as identification, and _____ did/did not take an oath. (Notary

Seal) My Commission Expires _____

Notary Public State of Florida _____

Print Notary Name _____

**ESCUELAS PÚBLICAS DE ST. LUCIE
EL ACUERDO DEL JUGADOR Y PADRE(S), PERMISO Y LIBERACION**

Nombre del Estudiante Atleta (Letra de Molde) _____

Dirección _____

Núm. Teléfono _____ Fecha de Nacimiento _____ Lugar de Nacimiento _____

Núm. Trabajo _____ Núm. Emergencia _____

Escuela _____ Grado _____ Deporte(s) _____

Yo/Nosotros, el Padre(s)/Guardián(es), abajo firmante del (Estudiante Atleta) mencionado arriba, reconocemos que competir en el atletismo Inter escolástico de las Escuelas del Condado de St. Lucie es totalmente voluntario y sujeto a las reglas y regulaciones de elegibilidad de la Asociación Atlética de Escuelas Secundarias de la Florida. Yo/Nosotros además reconocemos que no hemos violado y que en el futuro cumpliremos con todas las reglas puestas por el Distrito Escolar del Condado de St. Lucie, la Asociación Atlética de Escuelas Secundarias de la Florida y la escuela en que el Estudiante Atleta está matriculado (Escuela). **Todas las infracciones del Código de la Conducta de Estudiantes será reportada a la administración escolar. Todas las infracciones serán reprendidas con la Respuesta Disciplinaria apropiada como esta definida en el Código de Conducta de Estudiante Del Consejo Escolar de St. Lucie.**

Estudiantes Atletas y Padre(s)/Guardian(es) del Estudiante Atleta deben tener un conocimiento profundo de las responsabilidades y implicaciones de participar en una actividad extracurricular voluntaria. Por esta razón, cada Estudiante Atleta en las Escuelas del Condado de St. Lucie y su padre(s)/guardián(es), leerán y firmarán este acuerdo, permiso y liberación antes de que el Estudiante Atleta se le permita participar en cualquier forma de práctica o concurso atlética.

Yo/Nosotros, el Padre(s)/Guardián(es), abajo firmante, del Estudiante Atleta mencionado arriba:

1. Comprendo que debe completar la Evaluación Física de Preparticipación FHSS Consentimiento y el Certificado de Responsabilidad para poder participar como un estudiante atleta en el Condado de St. Lucie.
2. Comprendo que solamente una prima de seguro suplementario para el Estudiante Atleta debe ser pagado con fondos del distrito escolar. **Este seguro tiene un deducible de \$500.00.** Este deducible será aplicado concurrente con la cobertura primaria cual será pagada 100% Razonable y Acostumbrado. Si no ay cobertura primaria, este seguro pagará el 100% Razonable y Acostumbrado después del deducible de \$500.00.
3. Comprendo que en caso de accidente o herida, los oficiales escolares solamente completarán las formas de accidente requeridas por la Escuela, y que todas las reclamaciones bajo cualquier póliza aplicable para las heridas recibidas durante la participación en las actividades atléticas o incidente de viaje a dichas actividades serán tramitara por el Padre(s)/Guardián(es) o el Estudiante Atleta a través de la compañía agente a cargo de la póliza de seguro del Estudiante Atleta, y no a través de los oficiales escolares.
4. Comprendo que CIEN DOLLARES (\$100.00) NO REEMBOLSABLE será debido a mi selección a los equipo y deberá ser pagado antes de la participación en competiciones de cualquier. También comprendo que cuotas adicionales pueden ser evaluados para participar en un deporte específico, debido a limitaciones Financieras y incertidumbre a tiempos financieros.
5. Comprendo que se dará un recibo oficial de toda cuota pagada a la escuela para propósitos atléticos del Distrito Escolar del Condado St. Lucie.
6. Acepto responsabilidad financiera por cualquier equipo atlético perdido por el Estudiante Atleta.
7. Comprendo que si el comportamiento del Estudiante Atleta resulta en una multa impuesta por el FHSAA, la multa será evaluado para el estudiante y deberá ser pagada antes de poder participar en otras actividades. La multa mínima por conducta antideportiva bruta es de \$250.00.
8. Autorizo a la Escuela a transportar al Estudiante Atleta y obtener un medico a través de preferencia de la Escuela, cualquier cuidado médico de emergencia que sea racionalmente necesario para el estudiante en el curso de actividades atléticas o incidente de viaje a dichas actividades; y acordamos que los gastos de transportación y tratamiento no será cargo del Distrito Escolar o sus empleados.
9. Acepto responsabilidad completa y otorgamos permiso para que el Estudiante Atleta viaje de noche o cualquier viaje aprobado por el director de la escuela.

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10. Consentimiento a la liberación de transcripciones del estudiante atletas a la FHSAA y sus proveedores C2C Escuelas, Inc. a las universidades o a sus representantes con fines de reclutamiento.
11. Autorizamos la publicación del nombre, foto, grabación de voz, video, estatura, peso, nombre de la escuela, grado, posición y estadísticas deportivas para el acceso público, incluyendo, pero no limitado a la página del Internet del Distrito o escuela y programación de televisión deportiva.

AVISOA PADRE(S)/GUARDIAN(ES) DEL PARTICIPANTE ESTUDIANTE MENOR DE EDAD

LEA ESTA FORMA COMPLETAMENTE Y CON CUIDADO. USTED ACEPTA Y DE ACUERDO EN DEJAR SU HIJO(A) MENOR DE EDAD PARTICIPAR EN UNA ACTIVIDAD POTENCIALMENTE PELIGROSA.

USTED ACEPTA QUE, AUN CUANDO EL DISTRITO ESCOLAR DEL CONDADO ST. LUCIE, OFICIALES, DIRECTORES, EMPLEADOS USEN CUIDADO RAZONABLE AL PROPORCIONAR ESTA ACTIVIDAD, EXISTE LA PROBABILIDAD QUE SU HIJO(A) PUEDE RESULTAR GRAVEMENTE HERIDO O MUERTO POR PARTICIPAR EN ESTA ACTIVIDAD PORQUE HAY UNOS PELIGROS INHERENTES EN LA ACTIVIDAD QUE NO SE PUEDE EVITAR O ELIMINAR. AL FIRMAR ESTE FORMA USTED RENUNCIA EL DERECHO DE USTED Y SU HIJO(A) DE RECUPERAR DEL DISTRITO ESCOLAR DEL CONDADO ST. LUCIE EN UNA DEMANDA POR CUALQUIRE DANO PERSONAL, INCLUYENDO MUERTE, A SU HIJO(A) O CUALQUIRE DANO DE PROPIEDAD QUE RESULTE DE LOS RIESGOS QUE ES UNA PARTE NATURAL DE LA ACTIVIDAD. USTED TIENE EL DERECHO DE NO FIRMAR ESTE FORMA Y EL DISTRITO ESCOLAR TIENE EL DERECHO DE NEGARSE A QUE SU HIJO(A) PARTICIPE SI NO FIRMA ESTA FORMA

YO/NOSOTROS, PADRES DE ABAJO AFIRMANTES Y ESTUDIANTE ATLETA RECONOCEMOS HABER RECIBIDO UNA OPORTUNIDAD ADECUADA PARA REVISAR ESTE ACUERDO, PERMISO Y LIBERACION Y HACER PREGUNTAS A LOS OFICIALES ESCOLARES. RECONOCEMOS QUE HEMOS LEIDO Y ENTENDIDO ESTE ACUERDO; QUE ESTAMOS DE ACUERDO CON SUS TERMINOS; QUE CUMPLIMOS CON TODAS LAS REGLAS DEL DISTRITO ESCOLAR Y ASOCIACIÓN ESTATAL. COMPRENDEMOS QUE EL ESTUDIANTE ATLETA ESTA REQUERIDO A CUMPLIR CON TODAS LAS REGLAS E INSTRUCCIONES DE SEGURIDAD PROVEIDAS EN CADA DEPORTE, COMPETENCIA, PRÁCTICA MIENTRAS PARTICIPA DE DICHAS ACTIVIDADES.

YO/NOSOTROS ENTENDEMOS QUE LA PARTICIPACIÓN EN ATLETISMO INTERESCOLAR ES UN PRIVILEGIO. ADEMÁS, ENTIENDEMOS QUE EL DIRECTOR O PERSONA DESIGNADA TIENE LA ENTERA DISCRECIÓN A RETIRAR MI ELEGIBILIDAD EN CUALQUIER MOMENTO DEBIDO A UN COMPORTAMIENTO EN LA ESCUELA O FUERA DE LA ESCUELA QUE SE CONSIDERE INAPROPRIA POR EL DIRECTOR O PERSONA DESIGNADA AL SER IMPROPIO DE UN ATLETA ESTUDIANTIL.

-----RECONOCIMIENTO DE FIRMA DE PADRE/GUARDIAN-----

Nombre de Padre/Guardián (Letra de Molde) _____ Fecha _____

Firma de Padre/Guardián (En presencia de un Notario) _____

**ESTADO DE LA FLORIDA
CONDADO DE ST. LUCIE**

El instrumento precedente ha sido reconocido ante mí este _____ día de _____,
_____, por _____, El/Ella es _____ conocido personalmente por mí, o
_____ ha producido _____ como identificación, y _____ hizo _____ no hizo juramento.

(Sello de Notario)

Mi Comisión Expira _____

Notario Publico de la Florida _____
Nombre Notario (Letra Molde) _____

ÉCOLES PUBLIQUES DE ST. LUCIE
AKÒ PARAN AK JWÈ, PÈMISYON, AK RELIS

Non de Elèv ki Atlèt-la (Tanpri printe) _____

Adrès Lakay _____

Telefòn Lakay _____ Dat de Nesans _____ Plas de Nesans _____

Telefòn Travay Paran/Gadyen _____ Lèt Telefòn Emèjensi _____

Lekòl _____ Nivo Grad _____ Espò _____

Mwen/Nou, ki siyen anba-a ki se paran/gadyen de elèv non-l anwo-a (Elèv ki Atlèt-la), rekonèt ke konpetisyon nan aktivite atletik eskolastik ant lekòl-yo nan Kanton St. Lucie antyèman volontè epitou yo sijè a règ ak regilasyon elijibilite Asosiyasyon Atletik Lekòl Segondè nan Eta Florida. Mwen/Nou rekonèt anplis ke nou pa vyole epitou a lavni nou pral konfòme a tout lwa-yo ke Depatman Edikasyon nan Kanton St. Lucie, Asosiyasyon Atletik Lekòl Segondè nan Eta Florida ak lekòl kote Elèv Atlèt-la anrole mete sou plas. Yo pral repòte tout kontravansyon-yo de Kòd de Kondwit pou Elèv bay administrasyon lekòl-la. Tout kontravansyon-yo ekspoze a Repons Disiplinè apwopriye kòm sa jwen definisyon-l nan Kòd de Kondwit pou Elèv de Depatman Edikasyon nan Kanton St. Lucie.

Elèv atlèt-yo ak paran oubyen gadyen de elèv Atlèt-yo ta dwe genyen yon konpreansyon absoli de responsabilite ak enplikasyon de patisipe nan aktivite “extracurricular” volontèman. Pou rezon sa-a, chak Elèv Atlèt nan Lekòl Kanton St. Lucie, epitou paran-l, oubyen gadyen-l pral li, ak siyen akò sa-a, pèmisyon, ak relis avan pou yo pèmèt Elèv Atlèt-la de patisipe nan nenpòt fòm de pratik atletik oubyen konkou.

Mwen/Nou, ki siyen anba-a ki se paran/gadyen de Elèv Atlèt-la ke non-l anwo-a:

1. Konprann ke mwen dwe konplete “FHSAA” Evaliasyon Fizikal Avan Patisipasyon ak “FHSAA” Sètifika Konsantman ak Relis de Responsabilite afen de patisipe kòm elèv atlèt nan Kanton St. Lucie.
2. Konprann ke sèlman yon asirans sipleman tè pou Elèv Atlèt ap peye nan fon depatman edikasyon-an.
Asirans sa-a pral gen yon \$500.00 dediktib. Dediktib sa-a pral aplike anmenm tan avèk coveraj primè-a ke yo pral peye a 100% Rezonab epitou Kòm de Koutim. Si pa genyen yon coveraj primè, asirans sa-a pral peye 100% Rezonab epitou Kòm de Koutim aprè \$500.00 dediktib-la
3. Konprann ke anka de aksidan oubyen domajman, sèlman fòm aksidan ke Lekòl mande pral konplete pa anplwaye lekòl-yo, epi ke tout reklamasyon anba nenpòt polisi asirans ki aplikab pou domajman ke elèv-yo resevwa tandiske y-ap patisipe nan aktivite atletik oubyen vwayaj ki gen rapò a tèl aktivite pral antame pa paran/gadyen oubyen Elèv Atlèt-la atravè de ajan konpayi ki pran swen polisi asirans Elèv Atlèt-la, men **pa** atravè de anplwaye lekòl-yo.
4. Konprann ke yon **SENI DOLA (\$100.00) FRÈ KE YO P-AP REMÈT** sera exigible lors de ma sélection pour l’équipe et doivent être payés avant la participation à des concours. Mwen konprann tou yo andwa mete yon frè adisyonèl pou patisipe nan yon espò spesifik akòz de limitasyon finansyèl ak pa sèten de moman finansyèl-yo.
5. Konprann yo pral ba mwen yon Resi Ofisyèl de Depatman Edikasyon nan Kanton St. Lucie pou tout frè ke-m peye lekòl-la pou rezon atletik.
6. Asepte responsabilite finansyèl pou nenpòt ekipman atletik ke Elèv Atlèt-la pèdi.
7. Konprann ke si konpòtman de elèv atlèt sa-a lakòz ke “FHSAA” enpoze yon amann pa, ke amann-nan pral tonbe sou do elèv-la epitou dwe peye-l avan plis patisipasyon. Minimòm amann pou kondwit ki pa disple bon kalite nan espò se \$250.00
8. Otorize Lekòl-la pou transpòte Elèv Atlèt-la epitou pou obteni, atravè yon doktè ke-l chwazi, nenpòt swen medikal ki kapab vini rezonabman nesèsè pou elèv-la okou de aktivite atletik oubyen vwayaj ki gen rapò a tèl aktivite; epitou nou dakò ke depans-yo pou tèl transpòtasyon ak tretman pa pral tonbe sou do Depatman Edikasyon oubyen sou do anplwaye-l yo.
9. Asepte responsabilite total epitou bay pèmisyon pou Elèv Atlèt-la vwayaje nan nenpòt pwomnad ke direktè lekòl-la apwouve.

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10. Konsanti a relis de rekòd edikasyonèl ki gen rapò a non elèv-la, dat de nesans-li, ak elijibilite atletik nan Asosyasyon Atletik Lekòl Segondè nan Eta Florida epitou a Lekòl-yo ki founi sèvis (C2C), nan bi de repòte elijibilite pou patisipe nan atletik ak otorize relis de transkrip elèv-la a kolèj oubyen reprezantan-yo pou rezon de rekritman.

11. Konsanti relis de non elèv-la, foto, vwa, videyo, wotè, pwa, non lekòl-li, nivo klas ak pozisyon atletik akestatistik pou aksè piblik, ki enkli men pa limite a, enklizyon nan sit entènèt Distrik-la ak lekòl-la ak difizyon epitou nan pwogram atletik-yo.

AVI A PARAN/GADYEN DE TIMOUN MINÈ K-AP PATISIPE NAN AKTIVITE ATLETIK

LI FÒM SA-A KONPLÈTMAN EPI AK ANPIL ATANSYON. OU DAKÒ POU KITE PITIT OU-A KI MINÈ ANGAJE NAN YON AKTIVITE KI KAPAB YON DANJE. OU DAKÒ KE, MENM SI DISTRIK ESKOLÈ NAN KANTON ST. LUCIE, OFISYE LI-YO, DIREKTÈ-YO, ANPLWAYE-YO AK AJAN-YO ITILIZE SWEN REZONAB NAN FOUNI AKTIVITE SA-A, GENYEN YON CHANS PITIT OU-A KAPAB BLESE SERYEZMAN OSWA MOURI LÈ YO PATISIPE NAN AKTIVITE SA-A PASKE GEN DANJE NAN AKTIVITE-A KE OU PA KAPAB EVITE OSWA ELIMINE. PA SIYEN FÒM SA-A OU-AP ABANDONE DWA PITIT OU-A AK DWA OU GENYEN POU REKIPERE DE DISTRIK ESKOLÈ NAN KANTON ST. LUCIE NAN YON PWOSÈ POU NENPÒTAKSIDAN PÈSONÈL, KI ENKLI LANMÒ, A PITIT OU-A OSWA NENPÒT DOMAJ NAN PWOPRIYETE KI SE REZILTA DE RISK-YO KI SE YON PATI NATIRÈL DE AKTIVITE-A. OU GEN DWA POU REFIZE SIYEN FÒM SA-A, EPITOU DISTRIK ESKOLÈ NAN KANTON ST. LUCIE GEN DWA POU REFIZE KITE PITIT OU-A PATISIPE SI PA SIYEN FÒM SA-A.

MWEN/NOU PARAN KI SIYEN ANBA-A AK ELÈV ATLÈT-LA REKONÈT TE RESEVWA YON OPÒTINITE ADEKWAT POU REVIZE AKÒ SA-A, PÈMISYON, AK RELIS EPI MANDE ANPLWAYE LEKÒL-YO KESYON. MWEN REKONÈT KE-M TE LI EPI KONPRANN AKÒ SA-A; MWEN DAKÒ AVÈK TÈM-YO; MWEN PRAL OBSÈVE TOUT RÈG DEPATMAN EDIKASYON AK ASOSIASYON ETA FLORIDA. SÈ KONPRI KE YO MANDE TOUT ELÈV ATLÈT POU OBSÈVE TOUT RÈG DE SEKIRITE AK ENSTRIKSYON FOUNI AVÈK CHAK ESPÒ, KONPETISYON, PRATIK TANDISKE Y-AP ANGAJE NAN TÈL AKTIVITE.

MWEN/NOU KONPRANN KE PATISIPASYON NAN AKTIVITE ATLETIK SE YON PRIVILÈJ. ANPLIS DE SA, MWEN/NOU KONPRANN KE DIREKTÈ LEKÒL LA OSWA MOUN LI DEZIYEN GEN DWA DESIDE SELON PWÒP JIJMAN-L POU RETIRE ELIJIBILITE-M A NENPÒT KI LÈ POUTÈT DE KONPÒTMAN-M NAN ETABLISMAN LEKÒL LA OSWA ANDEYÒ DE ETABLISMAN LEKÒL LA KE DIREKTÈ LEKÒL LA OSWA MOUN LI DEZIYEN TA JIJE ENKONVENYAN POU YON ELÈV KI ATLÈT.

----- Pwosesis de rekonesans ke siyati paran/gadyen -----
Enprime paran/gadyen non _____ Dat _____

Siyen non paran/gadyen (nan prezans notè) _____

ETA FLORID ETA DE SAINT LUCIE

Enstriman qui a te rekonèt devan je m' sa a _____ jou _____, _____, pa

_____. Li se ___ pèsònèlman ke yo konnen m', ni ___ ki te prodwi

_____ kòm idantifikasyon, ak _____ te fè _____ pa t' yon ve.

(NOTÈ SO) Komisyon an mwen fini _____

Eta Florid notè piblik _____

Notè ekri non _____

FULL AND COMPLETE WAIVER AND RELEASE OF LIABILITY

In consideration of my minor child's participation in _____,
I hereby release St. Lucie Public Schools, its officers, directors, employees, agents, and
assigns (collectively, the "Sponsor" from any and all liability for damage to or
loss of personal property, sickness or injury from whatever source, legal entanglements, or death,
which might occur while participating in _____.

Parental permission is required for participation in this activity. Please read this form in its
entirety before signing. In accordance with Section 744.301, Florida Statutes, the sponsor
notifies as you follows:

NOTICE TO PARENTS/GUARDIANS OF MINOR CHILD PARTICIPANTS:

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU
ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN
A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE
AGREEING THAT, EVEN IF ST. LUCIE PUBLIC SCHOOLS,
ITS OFFICERS, DIRECTORS, EMPLOYEES, AND AGENTS
USE REASONABLE CARE IN PROVIDING THIS ACTIVITY,
THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY
INJURED OR KILLED BY PARTICIPATING IN THIS
ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS
INHERENT IN THE ACTIVITY WHICH CANNOT BE
AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU
ARE GIVING UP YOUR CHILD' RIGHT AND YOUR RIGHT
TO RECOVER FROM ST. LUCIE PUBLIC SCHOOLS IN A
LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING
DEATH, TO YOUR CHILD OR ANY PROPERTY**

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DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ST. LUCIE PUBLIC SCHOOLS HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I understand the nature of the _____ activities and represent that my minor child is qualified to participate, in good health, and proper physical condition to participate. I am aware of the risks of participation, which include, but are not limited to, the actions of any other participants and spectators and the chance of serious bodily injury, including permanent disability, paralysis, and death from engaging in _____ activities. I understand that participation in _____ activities is strictly voluntary, and I freely choose for my minor child to participate.

Participant's Name

Parent/Guardian Name

Date

Signature of Parent/Guardian



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LA RENUNCIA TOTAL COMPLETA Y LIBERACION DE RESPONSABILIDAD

En consideración de la participación de mi hijo (a) en [_____], Yo libero al Escuelas públicas de St. Lucie, sus oficiales, directores, empleados, agentes y asignados (colectivamente, el “Patrocinador”), de toda y cualquier responsabilidad por los danos o perdida de propiedad personal, enfermedad o accidente de cualquier origen, problemas legales, o la muerte, lo que podría ocurrir durante su participación en [_____].

Permiso de los Padres es necesario para la participación en esta actividad. Favor, lea esta forma en su totalidad antes de firmar. De acuerdo con la Sección 744.301, de los Estatutos de Florida, El patrocinador lo notificara a usted como sigue:

AVISO A LOS PADRES/GUARDIANES DE LOS PARTICIPANTES DE MENOR DE EDAD:

LEA ESTA FORMA COMPLETAMENTE CON CUIDADO. USTED ESTA DE ACUERDO QUE SU HIJO (A) PARTICIPE EN UNA ACTIVIDAD POTENCIALMENTE PELIGROSA. USTED ESTA DE ACUERDO EN QUE, INCLUSO SI EL ESCUELAS PÚBLICAS DE ST. LUCIE, OFFICIALES, DIRECTORES, EMPLEADOS, Y AGENTES USAN RAZONABLE CUIDADO EN PROVEER ESTA ACTIVIDAD, EXISTE LA POSIBILIDA DE QUE SU HIJO PUEDE RESULTAR GRAVEMENTE HERIDO O MUERTE POR PARTICIPAR EN ESTA ACTIVIDAD PORQUE AY CIERTOS PELIGROS INHERENTES EN LA ACTIVIDAD QUE NO PUEDE SER EVITADO O ELIMINADO. AL FIRMAR ESTA FORMA USTED Y SU HIJO (A) ESTAN DANDO EL DERECHO A RECUPERAR DEL ESCUELAS PÚBLICAS DE ST. LUCIE EN UNA DEMANDA POR CUALQUIERE DANO PERSONAL,

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INCLUYENDO MUERTE, A SU HIJO(A) O CUALQUIER DANO A PROPIEDAD QUE RESULTE DE RIESGOS NATURALES DE PARTE DE LA ACTIVIDAD. USTED TIENE EL DERECHO DE NEGARSE A FIRMAR ESTA FORMA Y EL ESCUELAS PÚBLICAS DE ST. LUCIE TIENE EL DERECHO A NEGARLE A SU HIJO(A) PARTICIPAR SI USTED NO FIRMA ESTA FORMA.

Comprendo, la naturaleza de las actividades [_____] y representa que mi hijo (a) menor de edad es calificado para participar, en buen estado de salud y condición física apropiada para participar. Estoy consiente de los riesgos de la participación, que incluyen, pero no se limita a, las acciones de los demás participantes y los espectadores y la responsabilidad de graves heridas, incluyendo la incapacidad permanente, parálisis y muerte de participar en actividades de [_____]. Comprendo, que la participación en las actividades de [_____] es estrictamente voluntaria, y elijo libremente que mi hijo (a) participe.

Nombre del Participante

Nombre del Padre/Guardian

Fecha

Firme de Padre/Guardian



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OTORIZASYON RANPLI AK KONPLÈ POU BAY EGZANSYON POU RESPONSABLITE

An konsiderasyon de pitit mwen ki minè k-ap patisipe nan [_____], mwen avèk prezant sa-a relache Écoles publiques de St. Lucie, ofisye-l yo, direktè, anplwaye, ajan, ak moun li asiyen (kolektivman, Esponsè-a), de nenpòt responsablite pou domaj oswa pèd de pwopriyete pèsònèl, maladi oswa aksidan de nenpòt kèl sous, enplikasyon legal, oswa lanmò, ki andwa rive pandan l-ap patisipe nan [_____].

Pèmision de paran nesèsè pou patisipasyon nan aktivite sa-a. Tanpri li fòm sa-a antyèman anvan ke ou siyen-l. An akò avèk Seksyon 744.301 de Lwa Eta Florida, esponsè-yo ap notifie ou kòm swivan:

AVI A PARAN/GADYEN DE TIMOUN MINÈ K-AP PATISIPE NAN AKTIVITE ATLETIK

LI FÒM SA-A KONPLÈTMAN EPI AK ANPIL ATANSYON. OU DAKÒ POU KITE PITIT OU-A KI MINÈ ANGAJE NAN YON AKTIVITE KI KAPAB YON DANJE. OU DAKÒ KE, MENM SI ÉCOLES PUBLIQUES DE ST. LUCIE, OFISYE LI-YO, DIREKTÈ-YO, ANPLWAYE-YO AK AJAN-YO ITILIZE SWEN REZONAB NAN FOUNI AKTIVITE SA-A, GENYEN YON CHANS PITIT OU-A KAPAB BLESE SERYEZMAN OSWA MOURI LÈ YO PATISIPE NAN AKTIVITE SA-A PASKE GEN DANJE NAN AKTIVITE-A KE OU PA KAPAB EVITE OSWA ELIMINE. PA SIYEN FÒM SA-A OU-AP ABANDONE DWA PITIT OU-A AK DWA OU GENYEN POU REKIPERE DE ÉCOLES PUBLIQUES DE ST. LUCIE NAN YON PWOSE POU NENPÒT AKSIDAN PÈSONÈL, KI ENKLI LANMÒ, A PITIT OU-A OSWA NENPÒT DOMAJ NAN PWOPRIYETE KI SE REZILTA DE RISK-YO KI SE YON PATI

NATIRÈL DE AKTIVITE-A. OU GEN DWA POU REFIZE
SIYEN FÒM SA-A, EPITOU ÉCOLES PUBLIQUES DE ST.
LUCIE GEN DWA POU REFIZE KITE PITIT OU-A PATISIPE
SI OU PA SIYEN FÒM SA-A.

Mwen konprann nati de aktivite-yo nan [_____] epitou
reprezante ke pitit mwen ki minè-a kalifye pou patisipe, li an bon sante ak bon kondisyon fizik
pou

patisipe. Mwen menm okouran de risk-yo ki gen nan patisipasyon, ki enkli, men pa limite a,
aksyon-yo de nenpòt lòt patisipan ak espektatè epitou chans pou blesi fizik grav, ki gen ladan
andikap pèmanan, paralizi, ak lanmò nan angaje nan aktivite-yo de

[_____]. Mwen konprann ke patisipasyon nan aktivite-yo de
[_____] se senpman volontè, epi mwen chwazi libman pou
pitit mwen-an ki mine patisipe.

Non Patisipan-an

Non de Paran/Gadyen

Dat

Siyati de Paran/Gadyen



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Field Trips and Extracurricular Activities Guidelines and Procedures were approved by the School Board members, September 10, 2019