

PARENT/GUARDIAN CONSENT FORM 2020

_____ has my permission to participate in the Flathead High School field trip to Newport, Oregon for ecological field studies from April 2 – 6, 2020.

In granting this permission, I recognize that I am agreeing to 1) accept general liability for my child’s participation in this program and 2) hold harmless Flathead High School and its employees and volunteers from all claims, liability or lawsuits arising from my child’s misbehavior or disregard of regulations while participating in the field trip. I certify that I am aware of the inherent dangers of coastal-related activities such as hiking and hereby assume such risks.

_____ agrees to follow the following code of conduct:

(Print student Name)

Student will:

- Represent Flathead High School in a manner as to reflect credit upon the school
- Follow FHS’s regulations as stated in the Parent/Student Handbook at **ALL** times
- Remain in the presence of an adult chaperone at **ALL** times
- Conduct him/her responsibly and safely

Possible Consequences depending on the infraction:

- Wednesday School
- In School Suspension
- Loss of credit for field study assignments

In consideration of _____ being provided with the opportunity to go to Newport, Oregon for ecological field studies with their IB class from April 2 – April 6, 2020, we agree to **pay a \$50 deposit on/or before January 15, 2020**. The remaining sum of **\$300.00** is due no later than **March 1, 2020** in order to finalize her/his reservations for travel and all activities. Because space is limited and expenses must be determined in advance of the trip, this sum is **NON-REFUNDABLE after March 1**.

If an unforeseen emergency causes a student to be unable to attend, if time allows, reasonable efforts will be made to find an alternate student who is able to prepay the fee. In the case where a replacement student is found, the fees will then be refunded. The student must be passing quarter 3 to attend the trip however, an F for the quarter is **not considered an unforeseen circumstance and your fees will not be refunded**.

This amount does NOT include any money for discretionary spending on the part of the student.

Date: _____ Signature of Parent/Guardian: _____

Student Signature: _____

Print first and last name: Mr. Mrs. Ms. (circle one) _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell phone or pager: (____) _____ Preferred Phone: **H** **W** **C**

Mailing address: _____ City: _____ State: _____

Zip: _____ Parent/Guardian’s Email: _____

Photographic Release: I do ____ I do not ____ give permission to Flathead High School to take photographs in which my image appears. These may appear in a newsletter or other materials. (Students will not be named in photos)