

**DEADLINE: Friday, December 9, 2016**

**Clark Atlanta University • Educational Talent Search • Liability Release Form**

**Mailing Address: 223 James P. Brawley Drive (Box 1884) • Atlanta, GA 30314**

**APS ETS Specialist: (404)880-8264 • Cobb ETS Specialist: (404)880-8269 • Coweta ETS Specialist: (404)880-8265**

I (We) hereby grant permission for \_\_\_\_\_ of \_\_\_\_\_  
Student Name Name of School

to participate in a field trip/activity to **Savannah, GA-January 15-16, 2017** and to make authorized or emergency stops as necessary. **Please Indicate your T-Shirt Size** \_\_\_\_\_

Educational Talent Search (ETS) participants will be traveling in the following manner:

**Select One**

- Self-Transportation       School Bus       Rental Vehicle  
 Provided Charter Bus       Walking

(1) Should my child have an accident or is injured in any way while attending this activity, I authorize an ETS staff representative to obtain medical treatment for my child, who may require emergency transportation. In the case of a serious illness or injury, I agree to pay for such ambulatory transportation and medical treatments and to hold Clark Atlanta University, ETS, and its Program personnel harmless for such medical treatment. I acknowledge that an ETS staff representative will try to reach me at the phone numbers below before any emergency treatment is given.

I further authorize Clark Atlanta University and the ETS Program to administer emergency first aid to my child until medical personnel arrive, and I agree that I will not hold Clark Atlanta University, the ETS Program, or Program personnel liable for such treatment.

Additionally, I agree that Clark Atlanta University, ETS and its employees shall not be responsible for any personal injury, loss or damage to property however caused and hereby hold harmless, waive and release Clark Atlanta University, ETS and its employees, from all claims for damages that may arise as a result of such loss during the course of my child's participation in the activity. This waiver and release specifically includes but is not limited to, claims of negligence.

I understand that participation in any field trip/off-campus activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injures, such as for instance, injures, both minor and major, sustained in a vehicular accident. I know, understand and appreciate these and other risks that are inherent in such activities, and I hereby assert that my child's participation is voluntary and that I knowingly assume all such risks.

(2) I have documented below all precautions/instructions regarding my child's medication. I have noted any special health-related conditions, such as chronic conditions (i.e. asthma, diabetes, allergies to bees or nuts, etc.) regarding my child and instructions related thereto.

Name of Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Name and Phone Number of Family Physician: \_\_\_\_\_

(3) All provisions of the rules and regulations for field trips with reference to conduct apply to field trips and activities. To ensure student safety and compliance with the rules and regulations, I understand and agree that there may be circumstances when my child's luggage, belongings, and room (where applicable) may be randomly searched for contraband.

**AUTHORIZATION:** Your signature below indicates that you have read and agree to the above statement.

\_\_\_\_\_  
Signature of Parent/Guardian      Print Name (Parent/Guardian)      Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
(Cell) \_\_\_\_\_

\_\_\_\_\_  
Alternate Emergency Contact      Phone (Home) \_\_\_\_\_      Phone (Work) \_\_\_\_\_      Phone (Cell) \_\_\_\_\_      Today's Date \_\_\_\_\_

# TRiO

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## **Field Trip Rules and Regulations**

### **SCHOOL SYSTEM RULES APPLY ON ALL CAU ETS FIELD TRIPS**

The purpose of this trip is as follows:

- To provide participants with enriching educational activities.
- To expose students to various post-secondary institutions and scholarship opportunities.
- To show students the opportunities available to people whom are economically independent.

Educational Talent Search students are required to conduct themselves respectfully, properly representing the program, their school, and Clark Atlanta University. The following rules are strictly enforced:

### **PARENTS ONLY – PLEASE INITIAL EACH LINE TO VERIFY YOU HAVE READ AND UNDERSTAND THE FOLLOWING RULES AND REGULATIONS.**

1. Students are not allowed to attend field trips without proper documentation from the parent or guardian. **Initial Here :** \_\_\_\_\_
2. A 24- hour cancellation notice is required for all field trips. If a student fails to attend a field trip, without giving prior notice, it is possible that they will not be allowed to attend the following field trip. **Initial Here :** \_\_\_\_\_
3. Musical instruments without headphones are not allowed on the bus. **Initial Here :** \_\_\_\_\_
4. An I-POD or MP3 player with earphones is permitted, however, it is not allowed during field trip activities. **Initial Here :** \_\_\_\_\_
5. Eating is not allowed on the bus unless announced on the trip. **Initial Here :** \_\_\_\_\_
6. Females and males are not allowed to sit together on the bus. **Initial Here :** \_\_\_\_\_
7. Students must be dressed appropriately at all times. Revealing attire, short shorts, crop tops and sagging/baggy pants are not allowed. **Initial Here :** \_\_\_\_\_
8. Blatant disrespect or disobedience will result in suspension or dismissal from the program. **Initial Here :** \_\_\_\_\_
9. Program staff must be notified in advance of medical conditions that require special attention or the administration of medication. **Initial Here :** \_\_\_\_\_
10. Possession or use of weapons, illegal drugs and alcoholic beverages will result in dismissal from the program. In addition, the use of profane language, fighting or stealing will result in dismissal from the program. **Initial Here :** \_\_\_\_\_
11. Students must be picked-up within **30-minutes** of returning from a trip or the authorities will be contacted. **Initial Here :** \_\_\_\_\_
12. **I authorize my child to walk home after being dropped off by the charter bus** (circle one) **Yes No**  
**Initial Here :** \_\_\_\_\_

**I have read, initialed and agree to the above rules and regulations as indicated by my signature below.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Signature