THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA 1960 LANDINGS BOULEVARD, SARASOTA, FL 34231 PHONE (941) 927-9000

FIELD TRIP AUTHORIZATION

Instructions: In-county field trips/school bus requisitions require principal approval only. All other field trips/school bus requisitions require principal and executive director approval. In addition, any trip involving students' out-of-state/country travel also requires School Board approval and should include release forms, insurance coverage, and other data supplied by the company assisting with the arrangements. Provide the information requested below and submit this completed form with appropriate attachments for approval adhering to the advance notification time prior to departure date noted after field trip below. Refer to School Board Policy 4.43.

Check One In-county Out-of-county (4 wks) Out-of-state (8 wks) Out-of-country (12 wks)

School Venice High Destination Chicago

Departing from Tampa	Date	9/26/2018	Time <u>1:00 PM</u>		AM/PM		
Returning from Chicago	Date	9/30/2018	Time 3:00 PM		AM/PM		
Grade/Class/Sport Girls \	olleyball Varsity	,					
Person-in-charge Brian W	/hetley	<u> </u>	Phone <u>941-35</u>	6-1475			
Method of transportation	marine .	tach School Bus Trip R			s		
	✓ Airline	Other (Explain)					
NOTE If other than a Sarasota County school bus is being used, attach certificate of insurance from carrier or Statement of Insurance on Private Vehicles form (065-96-FIN). See School Board Policy 8.36.							
Meal arrangements Stude	nt-athletes						
Lodging arrangements Bo	oster	·					
Number of female students 15 Number of male students 0 Total 15							
Number of female chaperones 3 Number of male chaperones 3 Total 6							
Names of chaperones Da	nielle Durham, Lisa V	Vheatley Janis Wolfe, Br	ian Wheatley, Crair	g Wolfe, Jay Lanham			
Cost per student \$ 0	Contact pers	on if financial assistance	e is needed	<u> </u>			
It is understood that permission slips and Emergency Medical/Treatment Consent For Field Trips And/Or Other After School Activities (063-96-DIS) forms will be obtained from parents prior to the field trip.							
Funding Source] Individual	indraiser PTO/PTA	Internal fund	ds			
	Other (Explain) <u>Bo</u>	oosters					
Verification of student med	dical insurance was	completed for out-of-co	unty/overnight trave	el? Yes No			
Principal Name (Print) Er					enied		
Principal Signature			<u> </u>	_ Date	. 18		
Executive Director Name (Print) Steve Contess Approved Denied							
Executive Director Signature Date 6/20 1/8							
Out-of-state/country field trip was School Board approved on (Board meeting date)							

RET: Master, 5FY, GS1-SL 340 Dupl., OSA

FIELD TRIP AUTHORIZATION

Instructions: Provide the following information for all field trips.

Explain the direct instructional connection with instructional program. Include any potential risks or hazards (e.g. water activity)
Elite Invite only to National Volleyball Tournament with many college scouts present.
Describe how students are being selected to participate with assurances of equal access for all students, regard of economic level.
Varsity volleyball team
Describe how students will be supervised once they arrive.
Team will be supervised by approved chaperones and will the group will follow an itinerary
Should an emergency arise, how will communication and transportation be handled?
911 will be called.
Cell phones
Parents will be notified immediately

RET: Master, 5FY, GS1-SL 340 Dupl., OSA

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FIELD TRIP PERMISSION

Instructions: Complete and return this form to the school. It must be returned to the school before student will be allowed to participate in this activity. The Emergency Medical/Treatment Consent for Field Trips and/or Other After School Activities form must also be on file at the school before your student will be allowed to participate in this activity. A copy of that form shall accompany this sheet with the classroom teacher/coach or interscholastic activity sponsor. A detailed itinerary is attached if the field trip extends beyond the school day.

School Venice High School	Date 6/19/2018
	~ 11
Eric Jackson	
Principal Name (Print)	Principal Signature
FIELD TRIP INFO	ORMATION
Purpose Volleyball Tournament Asics Invitationa	al
Destination Chicago	
Time/Date of departure 1:00 PM 9/26/2018	
Time/Date of return 3:00 PM 9/30/2018	
Leaving from Tampa	
Means of transportation Southwest Airlines paid by E	Boosters
Meal arrangements Student-athletes	
Cost to students Just meals	
If financial assistance is needed, contact	
FIELD TRIP PE	RMISSION
I,	, give my permission
Parent/Guardian Name (Print)	
forStudent Name (Print)	, to participate in the field trip
to	(destination) on (date).
The phone number where I can be reached during this field tri	p is
I realize that any activity that takes place away from the conhigher risk of injury to my child. I also understand that this act international conditions. I assume responsibility for any perconsideration for permitting my child to participate in this field rich and its employees, and agents from all claims, judgme resulting in any way from participation in the field trip describe	tivity may be cancelled due to changing state, national, or ersonal financial loss related to such a cancellation. In eld trip, I release The School Board of Sarasota County, nts, costs, or other expenses, including attorneys' fees,
Parent/Guardian Signature	Date
	,

RET. Master, ESY, GS7 37 Dupl., OSA 071-90-DIS Rev. 2-17-2017