

Mill Valley School District  
**GENERAL FIELD TRIP INFORMATION AND PERMISSION FORM\***

**SCHOOL RESPONSIBILITIES**

1. Obtain parental signature of approval on field trip form covering trips for whole year. Information to be sent home prior to the date of each trip, to provide parents with the opportunity to call the teacher with any questions they may have about any particular trip.
2. Send home, by teacher, information for each trip, stating purpose, details, safety and supervision provisions, and educational follow-up. (An exception to this would be an impromptu walking trip to a close destination of short duration *if permission has been granted.*)
3. Have Driver Form signed by each private car driver certifying that driver has full insurance, including \$5,000 minimum medical payment coverage.
4. Confirm that cars are driven by responsible adults only. Be sure that load is limited to driver's legal insurance capacity and to number of children driver feels he/she could handle in an emergency.
5. Verify that private vehicles used have seat belts in all seats *and will use child restraint systems (booster seats)* as required by state law
6. If bus transportation is to be provided, submit request to principal and make arrangements through the District Office.
7. Record each field trip in a school Field Trip Log Book (teacher, date, group, destination, duration, and transportation used.)

**USE OF PRIVATE CARS FOR FIELD TRIPS**

Pupils may be transported in (a) a passenger vehicle carrying no more children than the number for which it was designed, including the driver; (b) a nine-passenger station wagon when used for the transportation of not more than eight children and the driver.

Private car drivers must carry liability Insurance of \$100,000/300,000/50,000 to cover pupils in case of injury; district liability insurance covers pupils if parent insurance is not adequate. Private car drivers must carry medical payments Insurance of \$5,000 minimum, to cover pupils in case of injury where there is no liability (fault); district carries no medical payments insurance.

**(Please complete the section below as appropriate and return to school.)**

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**MILL VALLEY SCHOOL DISTRICT**

Student's Name \_\_\_\_\_ School Year \_\_\_\_\_  
( PRINT NAME)

Teacher's Name \_\_\_\_\_ School \_\_\_\_\_

\_\_\_\_\_ My child has permission to participate in class field trips during the school year, with transportation provided by private car or bus. I understand that I will be provided with information prior to each trip.

\_\_\_\_\_ My child will require a child restraint system (booster seat) for all field trips.

\_\_\_\_\_ My child also has permission to participate in short class walking trips when applicable (i.e., nature walk, visit to public library), which might be taken without prior notification.

\_\_\_\_\_ I might be available to drive my car for a class trip; please contact me at \_\_\_\_\_  
Daytime Phone

\_\_\_\_\_ My child does **not** have permission to participate in class field trips during the school year. I request that the school provide other educational activities for the duration of the trip.

Date \_\_\_\_\_ Parent Signature \_\_\_\_\_

**\*Completed for each child once a year; kept on file in office. Teachers are advised of permission or lack thereof.**