

Student Activity Overnight Trip Authorization and General Release

I/We		and		pareı		
all avv. marv	/ava abild to manticipate in th			ssion to the Vail Unifie	ed School District to	
-	our child to participate in th Utah Regional	e following school	sponsore	a activity.		
TRU	Juli Regional	Descripti	ion of Event			
VAHS	S	Везепри	John Py	eatt		
<u> </u>	School			Teacher's Name		
Date(s):	2/28 - 3/2/2023	Leave time:	5am	Return time:	8pm	
Mode(s) of transportation: School Van and mini-bus school bus, school van, private transportation, public bus, charter transportation						
		senoor ous, senoor	van, private	runsportution, puone ous, enure	or transportation	
I acknow arising fi superviso School D see that m child is h	ledge that there are risks inhrom: participation in outdors, communicable illness, an istrict staff. In order to minimy child is properly prepared ealthy and capable of attenderself or others.	erent in any childresser activities, chi d independent acts mize risks to my c for all activities an	ildren's fa s of third p child or oth nd is in go	ilure to follow instru- parties not under the co- ner participants, I/We vond health at the start of	actions of teachers and ontrol of the Vail Unified will take responsibility to the trip. I certify that my	
I do hereby release and discharge Vail Unified School District, its employees, administrators, successors and assignees, and any persons selected by Vail Unified School District to accompany my child (hereinafter referred to as "releasees") from all liability for any loss or damage, whether caused by the negligence of releasees or otherwise, and any and all actions, claims, demands, damages, costs, and expenses that in any way arise in connection with the aforementioned group activities and trips. If a dispute over this agreement or any claim for damages arises, the participant (parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.						
If you do NOT want your child to attend this school sponsored activity, please check this box \Box						
	Signature of parent/guardian	<u>n</u>	_	Do	ate	
I give per School Di	RELEASE rmission for my child to be istrict events and activities a eb site and/or Vail School D No	and have it publish	hed in the	newspaper and/or on		
	Signature of parent/guardian		_	Е	ate	