

PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISK FOR FIELD TRIP

(This form and an attached itinerary description are required for all field trips.)

IMPORTANT DIRECTIONS: (1) Use one form per trip, (2) Complete the school portion (top half) of form, (3) Duplicate one form per student, and (4) Send a copy home for parent and student signatures.



TO BE COMPLETED BY THE SCHOOL

Date(s) of Trip May 14 -16, 2026	Destination Philadelphia, PA
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Purpose
Attend the Stotesbury Cup Regatta, hosted by the Schuylkill Navy

FCPS stock medications, to include (Epinephrine, Albuterol, and Naloxone) will not be provided on this field trip.

SUPERVISION (Check one.)

Students will be directly supervised by adults on this trip at all times

Students will be directly supervised by adults on this trip with the following exceptions:
free time between races; while at river between spectator tent and boat launch; between curfew and breakfast while sleeping

TRANSPORTATION BEING PROVIDED (Check all that apply.)

Walking School Bus Commercial Carrier Personal Vehicle

Leased Vehicle County Vehicle None

DRIVERS OF PRIVATE OR LEASED VEHICLES (Check all that apply.)

Student Parent Teacher or Staff Member Other Adult

VEHICLE TYPE (Check all that apply.)

Car Van (10 passenger or less) SUV Other _____
(Specify)

RISK RELATED (Check all that apply.)

Swimming Pool Amusement or Theme Park Beach or Ocean Other Water Related Activity
(List activity)

TO BE COMPLETED AT HOME

Pupil Agreement

While participating in this trip, I will accept responsibility for maintaining good conduct and appearance, and I will follow directions at all times.

Signature of Student

Date

PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISKS

I understand that participation in this trip is voluntary, that it is not required, and that it exposes my child to some risk(s). I also understand that the trip may include amusement activities and that participation in any amusement activities will expose my child to some risk of injury or even death. I have read and understand the itinerary and authorize my child to participate in the planned components of the trip to the extent indicated by my signature below. I also understand that participation in the trip will involve activities off school property; therefore, neither the Fairfax County School Board, or its employees and volunteers, will have any responsibility for the condition or use of any nonschool property.

PARENT PERMISSION (Check all that apply.)

- Participation in all aspects of this trip.
- Participation in all aspects of this trip, except the amusement and theme park activities.
- Participation in all aspects of this trip, except the water-related activities.
- Other _____

I give permission for _____ to participate in this field trip.

Signature of Parent

Date

IMPORTANT NOTICE Fairfax County Public Schools (FCPS) cannot be responsible for reimbursements to parents or students of money submitted as advance payment (e.g., for Broadway shows, transportation, or hotels) for any trip that FCPS cancels. It is strongly recommended that you personally review any tour company's or commercial carrier's contract, including its stated refund policies, BEFORE your child signs up or pays for the trip.