

2022 Heritage Harbor Summer Camp FIELD TRIP FAQs

1. **Activity:** Field Trip Thursdays
2. **Place and Date of Trips:** Discovery Cube, 6/30; Adventure City, 7/28; Defy, 8/11; Soak City, 8/25
3. **Field Trips are included in Tuition for students coming throughout the summer**
4. **Pricing is available for students who only want to attend on Field Trip Thursdays**
5. ***Childcare is NOT provided on campus for Heritage Harbor Field Trip Thursdays.***
6. **Teachers in Charge:** Heritage Harbor Staff
7. **Object of Activity:** Great summer fun!
8. **Special Safety Issues:** Parent is responsible for sun screening (we will reapply) & water bottle (at least 16 oz.)
9. **Special Items Needed:** Wear Summer Camp t-shirt on all excursions, comfortable covered shoes, no open toe shoes (unless specified for a particular Field Trip)
10. **Food/Lunch:** For all excursions, parent provides a **Sack Lunch** & plenty of **Water**
11. **Morning Departure Time:** 9:00 AM
12. **Approximate Return Time:** 5:00 PM (unless otherwise noted)
13. **Means of Travel:** Bus (cost included in tuition)
14. ****Cancellation of Field Trips**:** Any destination that is not open for a planned Field Trip may be substituted for a different venue or on-campus activity

Fill out one Permission Slip for each student and return the signed Field Trip Permission Slip.

Permission for Participation in Off-Campus Field Trips

Student Name: _____ **Age:** _____ **Fall Grade:** _____

Medical / Special Needs:

If your student has allergies, a medical condition, or any other special needs, please indicate below and attach details with instructions for our staff: Allergy(s) Medical Condition(s) Special Need(s)

***Please understand that some special needs may prevent a student from participating in some events:*

Parent Contact Information:

Mother cell phone: _____ Mother work phone: _____

Father cell phone: _____ Father work phone: _____

Emergency Contact Name (*other than parent*): _____ Daytime Phone: _____

Print Parent Names: _____

Parent Signature: _____ Date: _____

****PLEASE NOTE**:** We cannot accept handwritten notes, phone calls, or other substitutions in lieu of this form. Students who do not return this form will not be permitted to attend field trips.

HERITAGE CHRISTIAN SCHOOL

CREDIT/DEBIT CARD / ACH AUTHORIZATION

Credit/Debit Card Information **(NOTE: There is a 3% transaction fee for credit/debit cards):**

Name on Card: _____

Email Address: _____

Card Number: _____ Expiration Date: _____

CCV (3 or 4-digit) code: _____ Zip: _____

Authorized by: Phone Email In Person

ACH Information:

Name on Bank Account: _____

Email Address: _____

Bank Name: _____

Account Type: Checking Savings Business Checking

Routing Number: _____ Account Number: _____

Authorized by: Phone Email In Person

By signing below, I authorize Heritage Christian School to debit/charge my credit/debit card **OR** my checking account via ACH with the information listed in the appropriate sections above:

Signature: _____ Date: _____

(MUST BE the name on credit/debit card or bank account)



HERITAGE CHRISTIAN SCHOOL

Parental Permission and Medical Consent with Liability Release

Student Name: _____ Birthdate: _____

Address: _____

City: _____ Zip: _____

The undersigned(s) being the lawful parent(s) and/or guardian of the above child (the "Child"), hereby consents to the participation by the Child in any school sponsored activity conducted by Heritage Christian School and to the participation of the Child in all events relating to the activity.

The undersigned hereby further authorize(s) any of the staff, employees, agents and representatives of Heritage Christian School to provide for, approve and authorize any health care at any hospital, emergency room, doctor's office or other institution; employ any physicians, dentists, nurses, or other person whose services may be needed for such health care; review and if necessary disclose the contents of any medical records; execute any consent form required by medical, dental or other health authorities incident to the provision of medical, surgical or dental care to the child. Health care shall include but not be limited to the administration of anesthesia, X-ray examination, performance of operations, diagnostic and other procedures.

If there is no medical emergency, the guardian will first use reasonable efforts to contact the parent(s) and/or guardian(s) before administering or authorizing any treatment.

Notwithstanding other provisions in this Consent Form, Heritage Christian School shall not have the authority to withhold or withdraw life-sustaining procedures for the Child.

The undersigned assume(s) all risk of injury or harm to the Child associated with participation in the Activity/Activities and agree(s) to release, indemnify, defend and forever discharge Heritage Christian School and its staff, employees and agents (collectively the "Organizer") of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action (collectively the Claims") in respect of death, injury, loss or damage to the Child, howsoever caused, arising or to arise by reason of or during the Child's participation in the Activity/Activities.

This Consent Form may be revoked at any time with written notice to Heritage Christian School.

Student Name

Parent's Signature

Date



HERITAGE CHRISTIAN SCHOOL

Release and Authorization to Use Student Image

During the 2020-2021 school year, Heritage Christian School may produce, participate in, or cause to be produced video, motion picture, audio recording, Web page, digital imaging, or photograph productions, broadcasts, school social media posts, and/or publications which may involve the use of students' images, names, likenesses, and/or voices. Such productions will be used for non-commercial education, exhibition, promotional, advertising, instructional, publicity, or other purposes by Heritage Christian School and will not be sold to other school systems or education professionals. Such productions may be copied, copyrighted, edited, and distributed by the school in the manner described above.

I understand that my image (if over age 18) or my child's image, name, likeness, or voice may be used, photographed, taped, or recorded in the manner described above. I hereby grant Heritage Christian School, and anyone authorized by the school the right to use, reuse, and reproduce the video, motion picture, audio recording, Web page, digital imaging, or photograph productions, broadcasts, and/or publications as described above, without any compensation to me and/or my child. I agree that all such videos, motion pictures, audio recordings, Web pages, digital images, or photographs shall be the property, solely and completely of Heritage Christian School. Heritage may copyright such work(s)/product(s) in its own name. I hereby waive any right to inspect or approve the finished work(s)/product(s) or the uses to which they may be applied. I hereby forever release and discharge Heritage Christian School from any and all claims, actions, and demands arising out of or in connection with the use of said video, motion picture, audio recording, Web page, digital image, or photograph, including, without limitation, any and all claims for invasion of privacy and libel. This release shall also apply to the assigns, licensees, and legal representatives of Heritage Christian School, the party/parties for whom Heritage Christian School took the video, motion picture, audio recording, Web page, digital image or photograph, and the party/parties for whom Heritage Christian School took the video, motion picture, audio recording, Web page, digital image, or photograph.

I have read the foregoing and fully and completely understand the contents hereof. I understand that I may rescind my authorization for use of my image or my child's/student's image at any time in writing.

Date: _____

Student Name

Parent/Guardian Signature Required for students under the age of 21:

Printed name of Parent/Guardian

Signature of Parent/Guardian