



FAIR OAKS RECREATION AND PARK DISTRICT
4150 TEMESCAL STREET, FAIR OAKS, CA 95628
916 966-1036

Camp Fair Oaks (FORPD) Field Trip Permission Slip

Child(ren)'s Name: _____

Parent's Name: _____

Date	Location	Address
June 16 th	Sunrise Rollerland	6001 Sunrise Vista Dr., Citrus Heights, CA 95610
June 23 rd	Sacramento Zoo	3930 W Land Park Dr., Sacramento, CA 95822
June 30 th	Color Me Mine	@ The McMillan Center
July 7 th	Folsom Sports Complex	66 Clarksville Rd., Folsom, CA 95630
July 14 th	John's Incredible Pizza Co.	384 North Sunrise Blvd, Roseville, CA 95678
July 21 st	Cal Expo – California State Fair	1600 Exposition Blvd., Sacramento, CA 95815
July 28 th	Folsom Century Theaters	261 Iron Point Rd., Folsom, CA
August 4 th	Discovery Kingdom	1001 Fairgrounds Dr., Vallejo, CA 94589
Every Tuesday June 14 th -August 9 th	Orangevale Community Center Pool	826 Hazel Ave. Orangevale, CA 95662

Permission to Participate

I give permission for my child(ren) listed above to attend the field trips state above. I understand that my child(ren) will be riding a bus to and from the location and that he/she is expected to follow the rules and directions set forth by the Camp Fair Oaks Staff and the field trip location. If my child(ren) is unable to do so, he/she will not be able to attend future trips. _____
 _____ (Initial)

Waiver, Release and Indemnity Agreement

In consideration for being permitted by the above District to participate in the above activity(ies), I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity(ies). This release is intended to discharge in advance the above District (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity(ies), even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding by my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of my death or any injury or property damage that I may sustain while participating in the said activity(ies). _____(Initial)

Medical Release

In the event of an emergency situation* while on the day camp field trip, I authorize Fair Oaks Recreation and Park District personnel to have my child(ren) transported by EMS to the nearest hospital and authorize treatment as deemed necessary in an emergency for the health of said child(ren). In the event that parents or other persons designated cannot be contacted, District staff are hereby authorized to take whatever action is deemed necessary in their judgment for the health of said child(ren). _____ (Initial) I decline medical release

Signature: _____ Date: _____

*An emergency situation requiring treatment is defined as a threat to life, where the failure or delay to treat would cause significant and/or irreversible injury. For children under the age of 18, consent is implied in emergency situations, since inaction may result in harm to the child.