

Trip Participant Contract

The Etiwanda High School Marching Eagle Regiment students will be participating in the London New Year's Day Parade 2017. Trip participants will be departing on December 27, 2016, and returning on January 3, 2017. Attendance is open to all 2016-2017 EHS MER students, as well as, the 2016 graduates of the EHS MER. Family members and chaperones are also invited to attend. Availability of tour packages for family members/guests will be dependent on the number of MER students participating.

Cost:

The Board estimates the cost of the trip will be \$3295 per attendee (student, chaperone, family member). Additional spending money for passport, lunches, souvenirs and extra baggage fees will also be needed.

Payments:

- Payments of the minimum monthly installments must be made in a timely manner in the form of cash, check, money order or credit card. Any charges for insufficient funds from checks will be passed on to the traveler. In addition, all future payments must be made via cash, money order or credit card, after one instance of a NSF check.
- 2. All incidental costs (passport, lunches, souvenirs, extra baggage fees, etc.) associated with the trip are the sole responsibility of the participant and his/her parent/guardian.
- 3. The final deadline for payment (November 1, 2016) must be met by the participant. The EHS Instrumental Music Program is not responsible if a participant cannot complete the trip. Refunds for cancellations are as follows:
 - a. \$200 deposit (due January 15, 2016). \$100 is non refundable
 - b. Cancellations made in writing prior to March 15, 2016 will receive a 100% refund of payments (excluding the \$100 deposit).
 - c. Cancellations made in writing after March 1, 2016 but prior to June 1, 2016, will receive a 50% refund of payment (excluding the \$100 deposit)
 - d. Cancellations made in writing after June 1, 2016, but prior to August 1, 2016, will receive a 25% refund of payment (excluding the \$100 deposit)
 - e. All payments for cancellations made after August 1, 2016, will be non refundable
 - f. Forfeited funds will first be applied to any costs due on behalf of the participant (i.e. fees) and the remainder left in the general band account

London Parade Payment Schedule (per person)

Deposit

\$200 January 15, 2016 \$100 non refundable

Payments \$300 each

Feb. 1, 2016

Mar. 1, 2016

Apr. 1, 2016

May 1, 2016 June 1, 2016

July 1, 2016

Aug. 1, 2016

Sep. 1, 2016

Oct. 1, 2016

Final Payment \$395

Nov. 1, 2016

Final payment amounts will vary depending on fundraising and final tour cost



Guidelines and Policies:

Student Policies: All school and district policies, in addition to EHS MER rules, apply while on this band trip. Additionally, students and chaperones, may NOT consume alcohol of any type while on this trip, regardless of the drinking age in England

Consequences: A student that breaks any of the rules or acts inappropriately may be sent home immediately at the parent's expense. In addition, any rule or policy violations prior to the trip will subject a student from possible exclusion from the trip. The EHS Instrumental Music Program is not responsible if a participant cannot complete the trip due to rule or policy violations and the cancellation policy in Section 3 under Payments will apply.

Chaperones: Costs for chaperones will be the same as other participants.

Student Illness: A student may also be sent home at the parent's expense should the child become ill and not be able to be around other students per district policies. All attempts to care for the student will be made prior to making arrangements for a return trip home.



Trip Participant Contract

| Student Participant: My child, in the band trip to the London New Year's I have reviewed the payment and cancellatic participate. | Parade from December 27 th , 201 | <u> </u> |
|---|---|-----------------------------|
| Parent or Guardian's Name(s): | | |
| Home Number: | Cell Number: | |
| Address: City: | State: Z | ip: |
| Parent Email Address: | | |
| Chaperone or Other Participant: I, in the band trip to the London New Year's I have reviewed the payment and cancellatic participate. | Parade from December 27 th , 201 | 6, through January 3, 2017. |
| Participant Name(s): | | <u></u> |
| Home Number: | Cell Number: | |
| Address: City: | State: Z | ip: |
| Email Address: | | |
| We are fully aware of the responsibilities so successful endeavor for our Band, School participants understand and agree to the participants Parade Trip. | and Community. By signing belo | ow, we the above named |
| Student's Signature | Parent/Guardian Signa | ture |
| Date | Date | |
| Chaperone/Other Participant Signature (If applicable) | . Date | |



Participant (print name):

WAIVER, RELEASE AND INDEMNITY AGREEMENT FOR <u>STUDENT PARTICIPATION IN VOLUNTARY NON-DISTRICT SPONSORED ACTIVITY</u>

| Description of Activity: London | New Year's Day | Parade | | |
|---|---|---|--|--|
| Date(s) of Activity: December 2 | 7, 2016 – Januar | у 3, 2017 | | |
| By my signature below, I hereby gunderstand that this activity is voluntated and therefore not part of the Chaffey extracurricular program. I understand for any such illness and/or injury or dechaperones and that no District-authoraware of the transportation arrangement transportation. | ary and is sponsored Joint Union High that this activity cleath. I am aware the orized supervision | ed by the Etiwanda High School I School District (District) and/or ould cause serious illness and/or at the Etiwanda High School Inst or oversight is being provided for | nstrumental Music Prog Etiwanda High School injury or death, and I ass rumental Music Program or the above-described | ram Boosters curricular or sume all risks n will supply activity. I am |
| For and in consideration of permittire hereby voluntarily releases, discharge bodily injury, property damage or wroten as a result of engaging in said activities may and assigns hereby release, waive district for him/herself and for his/her estate administrators and assigns prosecute, against the Boosters, District, and/or whether the same shall arise by the ne | es, waives and relices, waives and relices on gful death occurrity or any activities continue. The under charge and relinquite, and agrees the present any claim of School or any of | inquishes any and all actions or ring to his/her child/ward or him/l incidental thereto wherever or h ersigned does for him/herself, hi ish any action or causes of action, at under no circumstances will for personal injury, bodily injury its officers, agents, or employe | causes of action for penerself arising in any was owever the same may os/her heirs, executors, a aforesaid, which may he/she or his/her heir or, property damage or w | rsonal injury, by whatsoever occur and for dministrators ereafter arise rs, executors, rongful death |
| The undersigned hereby acknowledgehild/ward or him/herself, as stated, a relieve the Boosters, District, and/or sinjury, property damage or wrongful I have read and understand the foreinvolved in this activity and I am full the Boosters, District, and/or School design. | nd expressly acknown of the control | owledges their intention, by exect, agents, and employees, from an see out of or in any way be connected oluntarily signed this agreemental consequences of signing this in | uting this instrument, to y liability for personal and ed with the above-described. I am aware of the postrument. I further ackn | exempt and injury, bodily ribed activity. otential risks |
| Parent/Guardian Signature | Date | Participant Signature | Date | |
| Parent/Guardian Name (Please Print) | | Phone Number | | |
| Street Address | City | State Zip Code | | |
| | | | | |



WAIVER, RELEASE AND INDEMNITY AGREEMENT FOR NON STUDENT PARTICIPATION IN VOLUNTARY NON-DISTRICT SPONSORED ACTIVITY

| Participant (print name): | | | | | | | | |
|---|---|---|--|---|--|--|--|--|
| Description of Activity: London | New Year's Day P | arade | | | | | | |
| Date(s) of Activity: December 27, 2016 – January 3, 2017 | | | | | | | | |
| By my signature below, I hereby ackrethis activity is voluntary and is sponsemot part of the Chaffey Joint Union H program. I understand that this activity illness and/or injury or death. I am awand that no District-authorized superversus portation arrangements for this activity. | ored by the Etiwanda igh School District (y could cause serious are that the Etiwand ision or oversight is | a High School In District) and/or i s illness and/or i la High School I being provided | nstrumental Musi Etiwanda High S injury or death, a nstrumental Musi for the above-dea | ic Program Book School curricular and I assume all ic Program will a scribed activity. | sters and therefore or extracurricular risks for any such supply chaperones I am aware of the | | | |
| For and in consideration of participal discharges, waives and relinquishes an or wrongful death occurring to him/activities incidental thereto wherever. The undersigned does for him/herself, relinquish any action or causes of activate under no circumstances will he/sh personal injury, bodily injury, proper officers, agents, or employees for any persons, or otherwise. | hy and all actions or herself arising in an or however the same, his/her heirs, execu- on, aforesaid, which he or his/her heirs, ex- ty damage or wrong | causes of action by way whatsoever ne may occur and tors, administrate may hereafter are eccutors, administrated | for personal injuder as a result of d for whatever peopers and assigns hise for him/herselstrators and assignt the Boosters, D | ory, bodily injury f engaging in sa eriod said activitereby release, w lf and for his/her ns prosecute, pre- pistrict, and/or So | r, property damage aid activity or any ties may continue aive discharge and estate, and agrees esent any claim for chool or any of its | | | |
| The undersigned hereby acknowledge as stated, and expressly acknowledge District, and/or School, its officers, damage or wrongful death that may aunderstand the foregoing and have voland I am fully aware of the legal consand/or School does not provide medical | es their intention, by agents, and employerise out of or in any waluntarily signed this a sequences of signing | y executing this ees, from any livery be connected agreement. I am this instrument. | s instrument, to ability for person I with the above-caware of the pote I further acknown | exempt and rel nal injury, bodil described activity ential risks invol | ieve the Boosters by injury, property. I have read and wed in this activity | | | |
| Participant Name (Please Print) | | Participant Signat | gnature | Date | | | | |
| Street Address | City | State | Zip Code | <u> </u> | | | | |
| | | | | | | | | |