



Student Agreement and Medical Release for Classroom-Related Travel

Mt. San Antonio College
1100 N. Grand Avenue
Walnut, CA 91789-1399
909.274.4230

Routing: Originator Division Office (Until trip has occurred) Public Safety 909.274.4555

| | | |
|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Student Name: | | |
| (Last name) | (First Name) | Student I.D. # |
| Address: | | |
| (Number Street, City, State, Zip Code) | | (Area Code/Phone Number) |
| Home Phone: | Cell Phone: | Email: @student.mtsac.edu |
| Class Name: | | Class Reference #: |
| Faculty/Staff/Advisor Name: | | Phone #: |
| Department: | Semester/Session: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: | |
| Travel Destination(s) and Date(s): | | |
| General Description of Activities: | | |

- A. Waiver:** All persons making the field trip or excursion shall be deemed to have waived all claims against the District or the State of California for injury, accident, illness, or death occurring, or by reason of, the field trip or excursion. (Reference: Title 5 Section 55220)
- B. Medical Authorization:** In the event of illness or injury while participating in the above referenced activity, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical, dental diagnosis or treatment, hospital care and emergency transportation from a licensed physician, surgeon, and/or dentist as deemed necessary for my safety and welfare.

Participants Private Medical Insurance Carrier _____ Policy # _____ Insurance Carrier Phone _____

Medical Condition: Check here if you have a special need(s) or medical condition(s) and attach a description to this sheet.

In the event of an illness, accident, or other emergency, please notify:

| | | | |
|------------|--------------------|--------------|-------------------|
| Name _____ | Relationship _____ | Phone: _____ | Cell Phone: _____ |
|------------|--------------------|--------------|-------------------|

- C. Transportation:**
FIELD TRIPS: I will use transportation provided by Mt. San Antonio College for field trips.
OFF-CAMPUS MEETINGS: If an off-campus meeting requires me to use personal transportation, I understand that Mt. San Antonio College (its Board of Trustees, officers, employees, agents, representatives or volunteers) is in no way responsible, nor assumes liability, for any injuries, losses, claims or actions resulting from, arising out of or incident to, the non-District transportation. I understand that although the District may recommend travel time and/or routes to and/or from this event, such recommendations are not mandatory and do not in any way constitute District sponsorship of, or responsibility for, my transportation. I further acknowledge that the District does not provide any type of insurance, including liability, collision, or comprehensive, for students who provide their own transportation or provide transportation for other individuals in connection with an excursion/field trip activity.
- D. Acknowledgement** Mt. San Antonio College is **NOT** responsible or liable for any activities prior to the beginning date of the trip and beyond the end date of the trip _____
Beginning Date/Ending Date

My signature below acknowledges that I have carefully read these provisions and I fully understand and willingly agree to abide by these terms.

Student Signature _____ Date

If student is under 18, Parent/Guardian Signature _____ Parent/Guardian Printed Name

Standards of Behavior For On-Campus And Off-Campus Activities

Mt. San Antonio College students are expected to conduct themselves in a respectable manner, as the action of one individual can affect the reputation of the College. While participating in activities, students are serving as a representative of Mt. San Antonio College and must uphold the College Standards of Conduct.

Some violations may include:

1. Causing, attempting to cause, or threatening to cause physical injury to another person.
2. Possession, sale, or otherwise furnishing any firearm, knife, explosive, or other dangerous object, including but not limited to, any facsimile firearm, knife, or explosive, unless, in the case of possession of any object of this type, the student has obtained written permission to possess the item from a College employee, which is concurred by the College President/CEO.
3. Unlawful possession, use, sale, offer to sell, or furnishing, or being under the influence of, any controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the California Health and Safety Code, an alcoholic beverage, or an intoxicant of any kind; or unlawful possession of, or offering, arranging or negotiating the sale of any drug paraphernalia, as defined in California Health and Safety Code Section 11014.5.
4. Engaging in harassing or discriminatory behavior based on national origin, religion, age, sex (gender), race, color, medical condition, ancestry, sexual orientation, marital status, physical or mental disability, or because a person is perceived to have one or more of the foregoing characteristics.
5. Willful misconduct which results in injury or death to a student or to College personnel, or which results in cutting, defacing, or other injury to any real or personal property owned by the College or on campus.
6. Disruptive behavior, willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority of, or persistent abuse of, College personnel.
7. Harassment of students and/or College employees that creates an intimidating, hostile, or offensive environment.
8. Lewd, indecent, or obscene conduct on College-owned or controlled property, or at College-sponsored or supervised functions.
9. Mt. San Antonio College is **NOT** responsible or liable for any activities prior to the beginning date and beyond the end date of the trip

Beginning Date/Ending Date
10. The rules pertaining to the activity or event must be followed.

I further understand that I must adhere to the complete Standards of Conduct Policy and, if violated, I am subject to appropriate disciplinary procedures which could lead to suspension and/or expulsion determined by the severity of the incident.

Student's Name – Please Print

Student ID#

Students Signature (If student is under 18, Parent/Guardian Signature is also required)

Date