



The Water Conservation Garden – School Field Trip Waiver and Permission Form

School/Group Name: _____

Teacher/Group Leader: _____

Trip Date: _____

Participant Information (Please print clearly)

Student's Full Name: _____

Parent/Guardian Name: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Allergies or Medical Conditions: _____

Waiver of Liability, Assumption of Risk, and Medical Authorization

I, the undersigned parent or legal guardian of the above-named student, hereby give permission for my child to participate in a school-sponsored field trip to **The Water Conservation Garden**, located at 12122 Cuyamaca College Drive West, El Cajon, CA.

I understand that:

- Students will be engaged in outdoor, educational, and hands-on activities that may involve walking on uneven terrain, interacting with plants and wildlife, and exposure to sun and natural elements.
- The Water Conservation Garden staff and volunteers will provide programming, but school staff/chaperones are responsible for direct supervision.

By signing below, I acknowledge and agree to the following:

- I release and hold harmless The Water Conservation Garden, its employees, volunteers, partners, and affiliates from any and all liability, claims, demands, losses, or damages in connection with my child's participation in this field trip.
- I understand that every reasonable effort will be made to ensure my child's safety, and I assume full responsibility for any risk of injury or loss.
- In the event of an emergency, I authorize the supervising teacher or a representative of The Water Conservation Garden to obtain medical care for my child if I cannot be reached in a timely manner.

Photography/Media Release (Optional – Check one)

- I **give permission** for my child to be photographed or filmed during the field trip for educational or promotional purposes by The Water Conservation Garden.
- I **do not give permission** for my child to be photographed or filmed.

Signature and Consent

Parent/Guardian Signature: _____

Date: _____

Printed Name: _____