



# **A. Linwood Holton Governor's School**

April 11, 2019

The A. Linwood Holton Governor's School **Biology** classes will be holding their Spring 2019 field trip on Monday, April 29, 2019. Biology students are required to attend to fulfill the requirements for their dual enrollment laboratory credit.

Students will meet at the **Southwest Virginia Higher Education Center** in **Room 149** in Abingdon at 9:00 a.m. The event will conclude at 2:00 p.m. that afternoon. Students are responsible for their own transportation to and from the Higher Education Center.

Students will spend the day at the Higher Education Center completing laboratory activities related to our spring units on animal diversity, animal anatomy and organ systems, plant diversity, and plant anatomy. Students will be dissecting several animal and plant specimens, as well as looking at microscope slides related to the specimens.

Students should dress in comfortable clothing appropriate for working in the laboratory. Long hair should be pulled back and closed-toe shoes should be worn (no sandals or flip flops). Safety glasses, aprons, and disposable gloves will be provided for the students.

In order to make this adventure an enjoyable learning experience for everyone, all students will need to abide by the following:

### ***Participation:***

- All students who register for this field trip will be required, without exception, to participate in ALL activities of the field trip.
- Important lab requirements and scientific explorations will be fulfilled during this trip. *Biology students who do not participate in this trip will be required to complete a research project that will be assigned by their instructor in lieu of the information they will have missed.*

### ***Forms:***

- The attached forms MUST be received prior to any student attending this trip.
- Return forms on or before April 23<sup>rd</sup> by either:
  - Mailing
  - Faxing (276-619-4309) with coversheet
  - Scanning then emailing to [swhite@hgs.k12.va.us](mailto:swhite@hgs.k12.va.us)

**Please complete, sign and return the following to the Governor's School by April 23, 2019:**

- (1) Linwood Holton Governor's School Permission Form
- (2) Linwood Holton Governor's School Emergency Medical Form
- (3) Linwood Holton Governor's School Participant Wavier and Hold Harmless Form

Please send to the attention of:

**A. Linwood Holton Governor's School**  
**Attn: Field Trip**  
**P.O. Box 1987**  
**Abingdon, VA 24212**

If you have any questions, please feel free to contact me at (276) 619-4327. Thank you for your continued support.

Sincerely,

**Mike Robinson**

Michael M. Robinson, Director  
A. Linwood Holton Governor's School

Enclosures:

Linwood Holton Governor's School Permission Form  
Linwood Holton Governor's School Emergency Form  
Linwood Holton Governor's School Participant Wavier and Hold Harmless Form



# A. Linwood Holton Governor's School

## Permission Form

The following guidelines must be adhered to while participating in any A. Linwood Holton Governor's School field trip. Violation of these standards may result in immediate return of the student as well as subsequent disciplinary action.

1. Students will not be allowed access to personal vehicles until all school activities are completed.
2. No alcohol or other illegal substances are allowed. Any violation will result in immediate dismissal.
3. No cigarettes or tobacco products are permitted.
4. Students will participate in all activities as arranged by the Governor's School.
5. Students will conduct themselves as young adults at all times and remember their actions are reflective of the home and the Governor's School.

I, \_\_\_\_\_(please print), plan to participate in the Governor's School "Spring 2019 General Biology" field trip. I have read and understand the rules stated above. I agree to abide by these rules and realize that I can be dismissed from the program for failure to comply with them.

\_\_\_\_\_  
(Student's Signature)

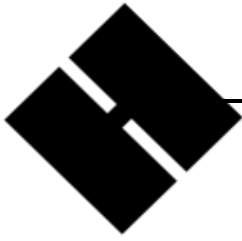
\_\_\_\_\_  
(Date)

I have read the guidelines above, and I give permission for my son/daughter to participate in the Governor's School field trip as scheduled. If needed, I can be reached during the day at \_\_\_\_\_ or the evening at \_\_\_\_\_.

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_  
(Date)

**THIS FORM MUST BE SIGNED AND RETURNED  
TO THE GOVERNOR'S SCHOOL  
BY APRIL 23, 2019.**



# A. Linwood Holton Governor's School

## EMERGENCY MEDICAL FORM

(Please type or print)

STUDENT'S NAME \_\_\_\_\_ SEX \_\_\_\_\_ D.O.B. / / \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE (DAY) \_\_\_\_\_ (EVENING) \_\_\_\_\_

Please list any significant health problems that might be important to a physician evaluating this student in case of an emergency. \_\_\_\_\_  
\_\_\_\_\_

Please list any medications, allergies, etc. \_\_\_\_\_  
\_\_\_\_\_

Is student presently taking medication? \_\_\_\_\_ If yes, what type of medication? \_\_\_\_\_  
\_\_\_\_\_

Please list date of last tetanus shot. \_\_\_\_\_

During Governor's School, students will be participating in a variety of activities. If there are any activities that this student should not or cannot participate in, please list below.

Signature of parent or guardian \_\_\_\_\_

### EMERGENCY AUTHORIZATION:

IN THE EVENT THAT I CANNOT BE REACHED IN AN EMERGENCY, I HEREBY GIVE MY PERMISSION TO THE PHYSICIANS SELECTED BY THE A. LINWOOD HOLTON GOVERNOR'S SCHOOL TO SECURE PROPER TREATMENT FOR THE PERSON NAMED ABOVE.

SIGNATURE OF PARENT OR GUARDIAN \_\_\_\_\_

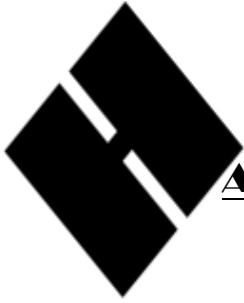
RELATIONSHIP TO STUDENT \_\_\_\_\_

INSURANCE COMPANY \_\_\_\_\_

INSURANCE POLICY NUMBER OR PHOTOCOPY OF CARD \_\_\_\_\_

DAYTIME EMERGENCY TELEPHONE \_\_\_\_\_

EVENING EMERGENCY TELEPHONE \_\_\_\_\_



## **A. Linwood Holton Governor's School**

Post Office Box 1987 ♦ Abingdon ♦ Virginia ♦ 24212  
Telephone 276.619.4326 ♦ Facsimile 276.619.4309

April 11, 2019

Dear Parent or Guardian:

As you know, the A. Linwood Holton Governor's School is planning a high quality field trip in the near future; it is as follows:

Mrs. Julie Reimer will be meeting with her General Biology classes at the Southwest Virginia Higher Education Center on April 29, 2019.

The A. Linwood Holton Governor's School will make every effort to secure and maintain the safety of your son or daughter while we are on any Governor's School trip. We have adequate and qualified adult supervision and expect the very best conduct from your son or daughter. Because of this fact, we ask that you sign and return the enclosed Participant Waiver and Hold Harmless Form.

Sincerely,

*Mike Robinson*

Michael M. Robinson, Director  
A. Linwood Holton Governor's School

Enclosure

**This enclosed form needs to be in  
our office by April 23, 2019.**



## **A. Linwood Holton Governor's School**

Post Office Box 1987 ♦ Abingdon ♦ Virginia ♦ 24212

Telephone 276.619.4326 ♦ Facsimile 276.619.4309

### **PARTICIPANT WAIVER AND HOLD HARMLESS**

#### **A. Linwood Holton Governor's School**

1. In consideration for receiving permission to participate in any of the field trips during this current school year (herein referred to as **ACTIVITY**) hereby **RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS** any and all purposes A. Linwood Holton Governor's School, all participating district county school boards, the A. Linwood Holton Governing Board, and their officers, servants, agents, volunteers, or employees (herein referred to as **RELEASEES**) **FROM ANY AND ALL LIABILITIES, CLAIMS, DEMANDS, OR INJURY, INCLUDING DEATH**, that may be sustained by me while participating in such activity, or while on the premises owned or leased by **RELEASEES**. I acknowledge there may be physically strenuous activities. I know of no medical reason why I should not participate.
2. I am fully aware that there may be inherent risks involved with **ACTIVITY**, and I choose to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. **I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH**, that may be sustained by me as a result of participating in said activity. I agree to indemnify and hold harmless the **RELEASEES** for any loss, liability, damage or costs, including court costs and attorney's fees, which may occur as a result of my participation in said activity. I further agree to indemnify and hold harmless the **RELEASEES** in the event that some problem or accident should occur, or that some Unforeseen Act of God or Nature, or any action or inaction by the **RELEASEES** resulting in injury or harm, or terrorist activity, should be encountered.
3. I understand that **RELEASEES** do not maintain any insurance policy covering any circumstance arising from my participation in this activity or any event related to that participation. As such, I am aware that I should review my personal insurance coverage.
4. It is my express intent that this Covenant Not to Sue and Agreement to Hold Harmless shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be governed by the laws of the Commonwealth of Virginia.

5. In signing this Covenant Not to Sue and Agreement to Hold Harmless, I acknowledge and represent that I have read the foregoing Covenant Not to Sue and Agreement to Hold Harmless, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements apart from the foregoing agreement that has been reduced to writing have been made. I execute this document for full, adequate and complete considerations fully intending to be bound by the same, now and in the future.

**SIGNED** this \_\_\_\_\_ day of \_\_\_\_\_.

**Student Printed Name:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Parent/Legal Guardian Signature:** \_\_\_\_\_  
(If Participant is under 18 years old)

**WITNESS:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_