

Lake Havasu City Field Trip Release

Participant Name (Last Name, First Name)	Date of Birth	Age	Gender (M/F)	Grade	School
					Smoketree Elementary

**Adventure Academy
Smoketree Elementary School
6/02/25— 7/16/25
7:30 a.m. - 6:00 p.m.**

By my initials below, I give permission for the above named Participant to attend the following field trips:
Place initials in the blanks provided below next to each field trip you want Participant to attend.
NOTE: Failure to initial a space will result in Participant **NOT** attending that field trip.

_____ Aquatic Center 7/15/25 2:00 p.m.—6:00 p.m. Transported via LHUSD Time will depend on day & school	_____ Hualapai Mountains 6/18/25 8:30 a.m.— 5:30 p.m. Transported via LHUSD	_____ Movies Havasu (PG-13) 7/11/25 8:45 a.m. - 11:00 a.m. Transported via LHUSD
_____ Grace Arts Theatre 6/6/25, 6/13/25, 6/24/25, 7/11/25 12:30 p.m. - 3:00 p.m. Transported via LHUSD	_____ Discovery Museum 7/2/25, 7/3/25 8:00 a.m.—5:30 p.m. Transported via LHUSD	_____ Rotary Park 6/4/25, 6/25/25, 6/27/25, 7/9/25 9:00 a.m.— 11:00 a.m. Transported via LHUSD

EMERGENCY MEDICAL RELEASE
 To the best of my knowledge, Participant is in good health and adequately immunized to participate in this field trip. In the event Participant is injured or should require medical attention, I authorize the securing of necessary medical treatment. I acknowledge that I will be responsible for all costs associated with any medical treatment. Confirmation of this authorization will be attempted if the circumstances permit prior treatment by calling the telephone numbers provided.

HOLD HARMLESS CLAUSE
 To the fullest extent permitted by law, Participant and Participant's parent or guardian agree to indemnify, defend, save, and hold harmless Lake Havasu City, its departments, agencies, boards, commissions, officers, officials, agents, volunteers, and employees ("Indemnitee") for, from, and against any and all claims, actions, liabilities, damages, costs, losses, or expenses (including, but not limited to, court costs, attorneys' fees, and costs of claim processing, investigation and litigation) to which any Indemnitee may become subject, under any theory of liability ("Claims") to the extent that Claims are caused by the negligent acts, recklessness, or intentional misconduct of the Participant arising out of or as a result of participation in this field trip. Participant/Parent/Guardian agrees to be responsible for primary loss investigation, defense, and judgement costs where this indemnification is applicable.

WAIVER
 Participant and Participant's parent or guardian waive the right to any claim for damages or injury of any kind on behalf of Participant, accruing to Participant arising out of or as a result of participation in the field trip.

I declare that I am the Participant's parent or guardian. I acknowledge that I read this form completely and understand the responsibilities and privileges of participating in this field trip. Participation in this field trip is voluntary. Lake Havasu City is not responsible for lost or stolen items. Lake Havasu City reserves the right to reconcile customer balances when participant has available account credit.

Parent/Guardian Signature _____ Date: _____

Print Name

FOR OFFICE USE ONLY:

Registration Form Completed: _____ Verified by: _____