

5521 Michigan Blvd. Concord, CA 94521 Office/Fax: (925)969-0808

Mobile: (925)788-6910

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MSES - Chaperone Policy & Agreement (1 of 2)

Chaperones must comply with all local school district requirements pertaining to the supervision of students. A signed **Agreement Form** is required before attending and chaperoning any event.

The **MSES Chaperone Policy** also requires that **all** parent chaperones must be fingerprinted with a current tuberculosis test on file prior to departure. These can be obtained and verified with your child's school district. Due to the fixed seat costs on the buses, some chaperones may be asked to ride together (car pool) in their own vehicle(s). Fuel reimbursements will be available with submission of original receipts.

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- A. Chaperones must be familiar with local school district (MDUSD) procedures regarding supervision before actual supervision commences.
- B. Chaperones must be responsible adults, twenty-one years of age or older, with no record of criminal conduct.
- C. The chaperone agrees to abide by all rules and regulations set by MSES for the health, safety, and welfare of the children and staff. Such rules and regulations may be provided verbally and in printed publications to students and chaperones. Copies of the rules and other information can be found at www.MonroeScienceEd.com.
- D. There will be no smoking or use of alcohol or any other illegal substances on the part of chaperones or students irrespective of age. This rule will be in force at all times. While some participants may be twenty-one years of age or over, the fact that they are participating in a school event overrides their age status.
- E. It is understood that MSES reserves the right to dismiss any chaperone whose condition, conduct, influence, or behavior is deemed by camp staff to threaten, or be detrimental to, the campers, park property and/or staff members.
- F. Chaperones will be responsible for Departure Readiness and Head Counts.
- G. Chaperones on overnight trips are responsible for ensuring that the students are in their appropriate cabin/room or other sleeping accommodations at a set curfew time, not roaming about creating noise and infringing on the rights of others.
- H. Chaperones understand that they are not covered by the MSES liability insurance policy during this activity.
- I. MSES is not responsible for chaperone personal belongings while in transit or on site.
- J. Field trips are to begin and end at the site of origin unless other arrangements are made in advance with Monroe Science Educational Services.
- K. Chaperones shall NOT bring friends or other family members on the field trip.
- L. Chaperones must be fingerprinted and have a current tuberculosis test on file. Please contact the Mt Diablo Unified School District Personnel Office at (925) 682-8000 to schedule an appointment a.s.a.p.

T.B. Test: please contact your personal physician or you may contact your local Muir/Diablo Occupational Medicine clinic: Concord (925) 685-7744 or Walnut Creek (925) 932-7715. Specify MDUSD to receive a reduced rate of \$20.00.



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MSES - Chaperone Policy & Agreement (2 of 2)

Chaperone Information				
I am Parent / Guardian / Relat	ve of Student's Name here:			
My Name:			DM DF	
Address:				
(Street)		(City)	(State) (Zip)	_
Phone:	/Evening)			
(Daytime)	(Evening)	(WODITE)		
Primary e-mail:				
In case of an Emergency, plea	se notify:			
Name:	Relationship: _			
Daytime Phone:	Evening Phone:		Mobile Phone:	
In the activity. I also herely bervices from all liability in medical coverage and I agree and it is accident or injury MSES the permission to use aptured during the participate limited to, vehicles such	their directors, staff, employed by release, hold harmless, connection therewith. In add ee to use my personal med y occurs. A signature on the se, for promotional purpose tion in any camp related act as an Internet Website, pro- entional and/or willful acts of	and discharge dition, I have be ical insurance as MSES Chaperes, any photogrivity. Promotional video	Monroe Science Educe advised to obtain pass a primary medical concerned agreement form graph, video, or audio al material may include, or hard-copy publication.	cationa persona overage grants to footage , but no
agroo to the above otated t	maporono proviolono.			
rint Name:	Signature: _			
Date:				
Mail or Fax this Form to:	Monroe Science Educat	ional Services		

Monroe Science Educational Services 5521 Michigan Blvd. Concord, CA 94521-1466 Office/Fax: (925) 969-0808