

SUMMER 2025 FIELD TRIP PERMISSION SLIP: EL TORO BRANCH @ MOUNTAIN VIEW

Permission List (Please Check ALL that apply. This is NOT an enrollment. Sign Ups are ONLINE)

Fees Depart	ure	Return
\$15	11:00AM	4:15PM
\$170	7:30AM	5:00PM
FREE	1:00PM	3:00PM
\$15	11:00AM	4:15PM
up \$75	10:00AM	3:00PM
FREE	1:00PM	3:00PM
\$15	11:00AM	4:15PM
\$70	10:00AM	4:00PM
FREE	1:00PM	3:00PM
\$30	11:00AM	6:00PM
\$15	11:00AM	4:15PM
old & up \$95	8:30AM	6:00PM
p Free	10:00AM	6:00PM
\$15	11:00AM	4:15PM
\$85	9:30AM	5:00PM
FREE	1:00PM	3:00PM
\$15	11:00AM	4:15PM
\$50	11:30AM	4:00PM
FREE	1:00PM	3:00PM
	\$15 \$170 FREE \$15 up \$75 FREE \$15 \$70 FREE \$30 \$15 old & up \$95 p Free \$15 \$85 FREE \$15	\$15

FIELD TRIP PERMISSION TO PHOTOGRAPH:

Boys & Girls Club of Laguna Beach program activities and events or field trips may be photographed, videotaped, or audio taped for educational, publicity or fundraising purposes. Please indicate by initialing either yes or no if you give permission for your child to appear in videos, photos, or audio recordings without compensation (i.e., as part of brochures, slide shows, Club social media platforms or Club website).

Initials: Yes	I give my permission.	Initials: No	I do not o	aive my	permission
	I give illy perillission.	IIIIIai3. NO	, i do not y	give iiiy	Permission



PUBLIC FILMING & PHOTOGRAPHY OUTSIDE OF CLUB: *Acknowledgement Initial Required

By your child participating on any <u>field trips or events outside</u> of the <u>Clubs premises</u>, the parent or legal guardian understands that their child may be photographed, filmed, or videotaped and you the parent and or legal guardian hereby given permission for outdoor public exposure but is not limited to (club related field trips, city events, etc.). During these events, the public has the unqualified right to take pictures and/or recordings of your child and grant the perpetual right to use your child's likeness, image, photo (collectively, "image"), without compensation, for broadcast or exhibition in any medium and to put the finished pictures/recordings to any legitimate use without limitation or reservation. You, the parent, or legal guardian does hereby waive, release, and forever discharge The Boys & Girls Club of Laguna Beach from and against any and all claims or actions arising out of or resulting from any use of your child's image. The public shall not be obligated to use, and may elect not to use, your child's image.

	Acknowledgement Initial:
SUNSCREEN UTILIZATION PERMISSION	
As the parent of the child, I give permission	for staff to apply sunscreen of SPF 15 or higher to my child when he or stand that sunscreen may be applied to exposed skin, including but not
	one will not prevent my child from sunburn and release from liability of Laguna Beach if sunburn is to occur.
Yes, I give permission for staff to ap	ply sunscreen on my child.
No, I do not give permission for staff before attending the Club.	f to apply sunscreen on my child. <u>I will apply sunscreen on my child(ren)</u>
hereby request that he/she should the need anesthetic, medical or surgical diagnosis rer medical staff and emergency room staff licer under the provisions of the Dental Practice A to operate a hospital from the state of Califorin advance of any specific diagnosis, treatment authority and power to render care which the It is understood that effort shall be made to a that any of the above treatment will not be we Clubs of Laguna Beach liable for medical aid	of the child listed on this field trip/event permission slip, a minor, do arise, do hereby authorize and consent to any x-ray examination, addered under the general or special supervision of any member of the nesed under the provisions of the Medicine Practice Act or dentist licensed Act and on the staff of any acute general hospital holding a current license rain, Department of Health. It is understood that this authorization is given to rhospital care being required. This authorization is given to provide a physician, in the exercise of his/her best judgment may deem advisable contact the legal guardian prior to rendering treatment to the patient, but withheld if the guardian cannot be reached. I will not hold Boys & Girls of rendered.
Parent/ Legal Guardian First and Last Name	Parent/ Legal Guardian Signature
First and Last Name of Emergency Contact	Emergency Contact Phone Number
MEMBER INFORMATION: *If parent/legal permission slip needs to be signed.	guardian has more than one child attending the field trip, a separate
Member First and Last Name:	
Member D O B	Health Concerns: