

SAN MARINO UNIFIED SCHOOL DISTRICT
APPLICATION FOR APPROVAL TO CONDUCT
MULTI-DAY OVERNIGHT AND/OR OUT-OF-STATE/COUNTRY FIELD TRIP
(AT LEAST THREE TO SIX MONTHS BEFORE DEPARTURE DATE)

(Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services)

To: Board of Education San Marino

Date: 9/20/19

The undersigned for San Marino High School _____ School hereby applies for approval to conduct a field trip to Battle for the Belt Date: _____

1. Inclusive dates of trip: <u>1/9/20 to 1/11/20</u> NOT DURING TESTING () Itinerary attached Principal's Initials <u>[Signature]</u>	2. Purpose of trip: Preparation for future competitions () Paragraph attached describing educational value and specific activities students will be required to complete
3a. Membership of Group: <u>Wrestling</u> (e.g., U.S. History class, choral group)	3b. Number of Students Attending: <u>10</u> Boys: 10 Girls:
4a. Cost of trip financed by: <u>TMWC</u> 4b. Name of travel agency contracted for trip: (professional travel organization is required) <u>Titan Travel</u> 4c. Cost per student: <u>0</u> (no student will be excluded from a required trip due to a lack of funds.) () Attached student(s) name and verify funding source	4d. Describe fundraising activities, if any: Attachment(s), if any
5a. Name of certificated employee(s) in charge of trip: <u>Eddie Aguirre</u> Responsible for coordinating fundraising, organization, and supervision while students are on SMUSD – sponsored trip	5b. Names of staff members who will provide supervision of students: <u>Jordin Humphrey and Joe Gallardo</u>
5c. Attach names of authorized chaperones on FORM #1 (include relationship to students and/or school)	5d. Student/Chaperone ratio: (see attached FORM #1)

This application, together with the necessary documents, must be sent to the Assistant Superintendent of Instructional Services at least three months in advance (unless an exception to timeline is granted).

The undersigned applying for approval of the field trip will ensure conformance with all requirements of San Marino Unified School District procedures for field trips out-of-state, to foreign countries and/or involving multiple days.

Endorsed with Approval:

[Signature]
(Field Trip Coordinator's Signature)

(Date)

[Signature]
(Principal's Signature)

(Date)

[Signature]
(Assistant Superintendent of Instructional Services Signature)

(Date)

Endorsed with Approval

BOARD APPROVAL DATE:

San Marino Unified School District
MULTI-DAY OVERNIGHT AND/OR OUT-OF-STATE/COUNTRY FIELD TRIP

Form #1

SCHOOL: San Marino HS **SPONSORING GROUP:** TMWC - Wrestling
ACTIVITY: Wrestling **DATE(S):** 1/9/20 to 1/11/20

DESTINATION: Battle for the Belt

Please attach flyer or printed information pertaining to Study Trip.

Number of Students: _____ Attach list of student names and gender

Submit 3 days before trip to appropriate Site Administrator

Number of Chaperones: _____ List chaperones names below and indicate gender [M or F], attach pages as needed

For Retirees indicate date retired

Certificated District Chaperones			Training Completed
	M	F	
Jordin Humphrey	x		Yes
Joe Gallardo	x		Yes

Classified District Chaperones			Training Completed
	M	F	

Non-District Chaperones			Training Completed
	M	F	

TRANSPORTATION

Commercial Carriers: Yes or No: No
(Examples: bus, plane, ferry, taxi, shuttle) (All buses must be CHP approved as SPAB, verify with SMUSD Transportation Department)

Private Vehicles: *DMV Report & Insurance Verification. Attach copy of completed forms and Parent/Guardian to sign Transportation Waiver Form for each student:* Yes ___ No ___
Students Parents will transport them

FUNDING

Individual Students: Yes ___ No ___
Donations: Yes x No ___
Fundraisers: Yes ___ or No ___ Name of Fundraiser _____
Others: _____
Chaperones expenses to be paid by: ☐ Funding indicated above ☐ Individual Chaperones

CHARGE OR BILL MANDATORY STUDENT TRIP LIABILITY INSURANCE TO:

District Office staff in accordance with Board of Education Policy 3541.1(c) will obtain liability/insurance coverage.
In State CA Out of State _____ Out of Country _____

Others: _____

When submitting field trip invoices for payment (includes deposits) attach a copy of this form and board item.

Please submit all approved paperwork at least 3 weeks prior to Board Date.

Please route (1) copy of this form to Human Resources Dept.
Submit to Assistant Superintendent of Instructional Services

San Marino Unified School District
FIELD TRIP COORDINATOR'S CHECKLIST
FOR MULTI-DAY OUT OF COUNTRY FIELD TRIPS

School: SM High School Dates of Trip: 1/9/20 to 1/11/20

Trip Destination: Battle for the Belt

To be completed by field trip coordinator in charge of the field trip

Date Completed	Initials	SIX MONTHS PRIOR TO TRIP Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.
9/27/19	EL	1. Secure Principal's tentative approval to conduct field trip (and approval to conduct fundraising, if applicable). Send form Application for Approval to Conduct Multi-Day Out of Country Field Trip to the site administrator in charge of field trips.
9/27	EL	2. Review procedure for fundraising and develop plan to include: a) description of fundraising activities, b) plans to assist students who are unable to pay their own expenses, c) a written statement that no student will be excluded from a required trip due to lack of funds, and d) that funds will be returned to the school if not used for the trip.
9/27	EL	3. Select the travel agency to be used (if appropriate). Have travel agency complete "Compliance Form for Sellers of Educational Travel" and forward to the site administrator in charge of field trips.
9/27	EL	4. Obtain and submit copy of itinerary. This itinerary shall include: a) dates (not during testing), b) locations (city, state, country) and c) accommodations. Attach itinerary
9/27	EL	5. Arrange for chaperones, if appropriate. Provide chaperones with guidelines to complete Volunteer Application and the on-line training module no later than, date _____. Ensure chaperones have completed chaperone training and agree to comply with all states and District laws, rules, and regulations. Provide list to Principal and secure his/her approval.
9/27	EL	6. If academic competition is involved, submit to Principal for approval: a) written criteria and guidelines used to select participants in academic competitions, and b) copies of written communications used to inform parents and students of the academic competition and of the governing guidelines.
9/27	EL	7. Send home request for parental approval of student participation. If parent does not sign, student cannot go.
9/27	EL	8. Verify insurance coverage to provide personal medical insurance for participating students where required.
9/27	EL	9. Secure trip cancellation insurance from travel agency where required.


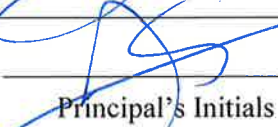




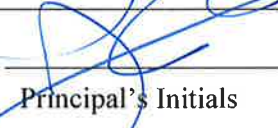

9/27	EC	10. Notify parents of other insurance coverage available as an option.
9/27	EC	11. Provide written evidence of financial ability to cover travel and living expenses for all participants while outside of San Marino.
9/27	EC	12. Verify that permission forms and waivers are returned for all students participating on a field trip. Verify alternate arrangements at school for those students not participating.




Date Completed	Initials	TWO MONTHS PRIOR TO FIELD TRIP Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.
		13. Field trip coordinator develops orientation plan for students, parents, and chaperones.

Date Completed	Initials	THREE WEEKS PRIOR TO FIELD TRIP Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.
		14. Arrange for participating students to be excused from other classes.
		15. Arrange for first-aid kit and/or snake-bite kit, and ensure they are taken on trip.

Date Completed	Initials	ONE WEEK PRIOR TO FIELD TRIP Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.
		16. Report to principal's designee the names of all persons (adults and students) who will actually go on the trip. Provide list of students to verify those actually participating prior to departure.
		17. File this form with other required papers in school office. (Records must be kept for three years.)

San Marino Unified School District
PRINCIPAL'S CHECKLIST
MULTI-DAY AND/OR OUT-OF-STATE/COUNTRY
FIELD TRIPS

1. Approval for Field Trip: I have reviewed the plan for the field trip to _____ on _____ (not during testing) and I give tentative approval for the students to participate.	 Principal's Initials	<u>10/28/19</u> Date
2. Approval for Field Trip Fund-Raising: I have reviewed the plan for fundraising for this field trip and give my approval for fundraising activities to begin.	 Principal's Initials	<u>10/28/19</u> Date
3. Lack of Funds: To help students in need of funds, the following actions are being taken:	 Principal's Initials	<u>10/28/19</u> Date
4. Return of Funds: Any funds not used for the trip will be returned in the following way:	 Principal's Initials	<u>10/28/19</u> Date
5. Chaperones: An approved list of chaperones is on file in the main office of the school. (FORM #1)	 Principal's Initials	<u>10/28/19</u> Date
6. Academic Competition Trips Only: I certify that written criteria, guidelines and other communication to parents and students related to the competition are on file in the main office of the school.	 Principal's Initials	<u>10/28/19</u> Date
7. Insurance: I certify that each and every student participating in the field trip has personal medical insurance and trip cancellation insurance, if applicable.	 Principal's Initials	<u>10/28/19</u> Date
8. Travel and Living Expenses: Provision has been made for coverage of all expenses while outside of San Marino. This includes airfare, ground transportation, hotels, tours, and meals. Written evidence of this coverage is on file in the main office of the school.	 Principal's Initials	<u>10/28/19</u> Date

9. Contribution of Services: Statement of Acknowledgment and Consent to Conditions of trip are on file at the following location at the school site:	 _____ Principal's Initials	<u>10/28/19</u> Date
10. Authorization for Student Participation: For each and every student participating in the field trip there is a <i>Permission to Participate, Notification of Insurance, Waiver of Claims, and other Release Forms</i> on file in the main office of the school. File title, if appropriate:	 _____ Principal's Initials	<u>10/28/19</u> Date
11. Forward this completed form to the Assistant Superintendent of Instructional Services.	 _____ Principal's Initials	<u>10/28/19</u> Date

Conflict of Interest Disclosure Form

Each Principal, ASB Advisor or Sponsoring or participating in a tour or trip paid by students is required to complete this form.

Field Trip and Date: 1/9/20 to 1/11/20

Name: Eddie Aguirre

Position: Head Coach

Location: Temecula Valley, CA (Battle for the Belt)

Indicate below whether you or a member of your family is currently receiving (or has received during the last five year) any gratuity, commission, rebate, or thing of value from any travel agency or travel promoter involved or associated with the trip. Airfare, hotel accommodations, etc., provided in return for chaperoning should be listed and would be considered reasonable and acceptable.

Self	Relative	Company Name	Type of Gratuity	Value of Gratuity	Year of Gratuity
None					

Signature: Eddie Aguirre Date: 9/27/19

SAN MARINO UNIFIED SCHOOL DISTRICT
STATEMENT OF ACKNOWLEDGMENT AND CONSENT TO CONDITIONS OF TRIP
(Employee Chaperone of the San Marino Unified School District)

I, Eddie Aguirre, am an Employee of the San Marino Unified School District
(Name of Employee)

assigned to SM High School, a public school operated by
(Name of School)
the San Marino Unified School District.

I understand that a group identified as SM High School Wrestling
(School Function)

at the following school(s): SM High School

will participate in a field trip to Battle for the Belt.

and that I have been asked to accompany these students on their trip during the period from

1/9/20 to 1/11/20.

I agree to donate as much of my time beyond my normal workday as may be required while on the field trip. I understand that I will suffer no loss of pay by reason of participating in the field trip. I further understand that, except as set forth above, I may receive no additional compensation for any such time or services donated by me, or for any other reason, in connection with the trip.

I am aware of the provisions of Education Code Section 35330, which states in part that "... All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during, or by reason of, the field trip or excursion..."

My acknowledgment of the foregoing paragraph is subject to the provision that I retain any and all of my employment rights including, but not limited to, District liability insurance, workers compensation insurance, and District health insurance.

I acknowledge that I have received Chaperone Guidelines and agree to comply with them.

I acknowledge that I have completed the online training and agree to comply with all state, federal laws, and District policies and regulations.

I have read and understand the foregoing statement and sign it below voluntarily.

Executed in the City of San Marino, County of Los Angeles, State of California, on

9/27/19
(Date and Year)

Eddie Aguirre
(Signature)

Eddie Aguirre
(Print or Type Name)

SAN MARINO UNIFIED SCHOOL DISTRICT
STATEMENT OF ACKNOWLEDGMENT AND CONSENT TO CONDITIONS OF TRIP
(Adult Chaperone, not an Employee or Student in the District)

I, Jordin Humphrey, am the Asst. Coach
(Name of Adult) (Indicate Relationship to Student)

of SM High School, a student enrolled at _____ (Name of Student)
(Name of School)

a public school operated by the San Marino Unified School District.

I understand that a group identified as SM High School Wrestling Team (School Function)
enrolled at the following school(s): SM High School

has been offered the opportunity to participate in a field trip to Battle for the Belt,
and that I have been asked to accompany these students on their trip during the period from
1/9/20 to 1/11/20.

I understand that my participation in the aforementioned program, including the field trip, is voluntary. I agree to pay all expenses for my participation in the field trip including, but not limited to, the cost of airfare and such insurance as may be required by the San Marino Unified School District.

I am aware of the provisions of Education Code Section 35330, which states in part that "... All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during, or by reason of, the field trip or excursion..."

I acknowledge that I have received Chaperone Guidelines and agree to comply with them.

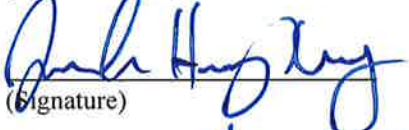
I acknowledge that I have completed the online training and agree to comply with all state, federal laws, and District policies and regulations.

I have read and understand the foregoing statement and sign it below voluntarily.

Executed in the City of San Marino, County of Los Angeles, State of California, on

9-27-19

(Date and Year)


(Signature)

JORDIN HUMPHREY
(Print or Type Name)

SAN MARINO UNIFIED SCHOOL DISTRICT
STATEMENT OF ACKNOWLEDGMENT AND CONSENT TO CONDITIONS OF TRIP
(Adult Chaperone, not an Employee or Student in the District)

I, Joe Gallardo, am the Asst. Coach
(Name of Adult) (Indicate Relationship to Student)

of SM High School, a student enrolled at _____ (Name of Student)
(Name of School)

a public school operated by the San Marino Unified School District.

I understand that a group identified as SM High School Wrestling Team (School Function)
enrolled at the following school(s): SM High School.

has been offered the opportunity to participate in a field trip to Battle for the Belt,
and that I have been asked to accompany these students on their trip during the period from
1/9/20 to 1/11/20.

I understand that my participation in the aforementioned program, including the field trip, is voluntary. I agree to pay all expenses for my participation in the field trip including, but not limited to, the cost of airfare and such insurance as may be required by the San Marino Unified School District.

I am aware of the provisions of Education Code Section 35330, which states in part that "... All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death occurring during, or by reason of, the field trip or excursion..."

I acknowledge that I have received Chaperone Guidelines and agree to comply with them.

I acknowledge that I have completed the online training and agree to comply with all state, federal laws, and District policies and regulations.

I have read and understand the foregoing statement and sign it below voluntarily.

Executed in the City of San Marino, County of Los Angeles, State of California, on

9-27-19
(Date and Year)

[Signature]
(Signature)

Joe Gallardo
(Print or Type Name)



CONTRACT FOR ATHLETIC CONTESTS

This contract may be used in arranging non-league and tournament interscholastic athletic contests. Regular league schedules are official and binding on said league members and do not require individual contract. Please refer to Blue Book rules 150-153.

This **CONTRACT** is made and subscribed to by the principals and athletic administrators of

"Battle for the Belt" - Temecula Valley High School and _____ High School

for co-ed _____ contests in _____ Wrestling _____ to be played as follows:
(Boys' or Girls') (Name of Sport)

LEVEL	SITE	DATE	STARTING TIME
Varsity	TVHS - Battle for the Belt	Fri. 1/10/20 & Sat. 1/11/20	Fri/Sat 9:00 a.m.
Jr. Varsity	_____	_____	_____
Soph	_____	_____	_____
Frosh	_____	_____	_____
Frosh-Soph	_____	_____	_____

REMARKS: _____

FINANCIAL ARRANGEMENTS

A. General Admission	\$8.00	F. Faculty Passes honored Both Schools	NO
B. Home Students WITH ASB Cards	\$5.00	G. Advance Sale Permitted	NO
C. Visiting Students WITH ASB Cards	\$5.00	H. Visiting Band In Uniform Admitted Free	
D. Student (Both Schools) WITHOUT ASB Cards	\$5.00	With Advisor	NO
E. Children Admission	\$5.00	I. Visiting Pep Squads Admitted Free	NO
		With Advisor	NO

ADDITIONAL FINANCIAL TERMS: . Tournament Fee \$500.00 - If not paid by 12/20/19 fee is \$550.00

Go to Battle4thebelt.com for additional information. One wrestler = \$100 / 2 = \$200 / 3 = \$300 / 4 = \$400

MEDICAL RESPONSIBILITY: Trainer on duty

OTHER ARRANGEMENTS: Full Snack Bar

Return to **HOST SCHOOL** by: Lyndon Campbell - lcampbell@tvusd.k12.ca.us
Fax # 951-695-1639

All contests must be played under the regulations and rulings of the California Interscholastic Federation and the Southern Section of which the contracting schools are members. These regulations and rulings are a part of this contract. Use back side of form for additional comments.

HOST SCHOOL INFORMATION		VISITING SCHOOL INFORMATION	
School Name	Temecula Vally High School	School Name	_____
School Address	31555 Rancho Vista Rd. Temecula	School Address	_____
School Phone Number	951-695-7300	School Phone Number	_____
School Fax Number	951-695-7311	School Fax Number	_____
Host School Principal's Signature Allen Williams <i>AL Williams</i>		Visiting School Principal's Signature	
Host School Athletic Administrator's Signature Grant Martin Jr. <i>GP</i>		Visiting School Athletic Administrator's Signature	
Date: _____		Date: _____	
Host A.D. Email Address <u>gmartin@tvusd.k12.ca.us</u>		Visiting A.D. Email Address	
Host A.D. Cell Phone # <u>951-501-6093</u>		Visiting A.D. Cell Phone #	

NOTE: All contracts to be valid must be signed by the principal and the athletic administrator at each school. When the principal and athletic administrator of one of the contracting schools is new to the school, he should be notified of existing contracts before the beginning of the season.

HOST SCHOOL SHOULD BE LAST TO SIGN

Revised 8/11



WRESTLINGMART

presenting

at Temecula Valley High School

Friday and Saturday January 10th-11th, 2020

[Home](#)[2019 Tournament Info](#)[Live Video](#)[Results](#)[Awards](#)[Apply Online \(for 2020\)](#)[Tournament History](#)[Hotel Accommodations](#)[Facilities](#)[Map](#)[Junior Battle for the Belt](#)[Related Links](#)

2020 Battle for the Belt Online Application

Please complete the following application if you are interested in bringing high school wrestlers to the 2020 Battle for the Belt hosted by Temecula Valley High School. The tournament will be held on Friday and Saturday, January 10th-11th, 2020.

The information you submit will be reviewed by tournament directors. Thank you very much for your interest!

* Required

Contact Information

School *

Choose an answer

City *

Choose an answer

State *

Choose

Section *

If you are from California, please select the CIF section you are in. Otherwise, select "Out of state".

Choose

Head Coach(es) *

Choose an answer

Phone *

Phone

Email Address *

Email Address

Team Information

Wrestler count *

While we encourage teams to bring all 14 wrestlers if they wish, we also understand that coaches want to bring wrestlers who are competitive at this level. Please let us know your intentions by selecting one of the options below. We plan on bringing...

Choose

Team achievements from last season

- ☐ Top 20 team in state in 2018-19
- ☐ Top 5 team in section in 2018-19
- ☐ CIF/Division champions in 2018-19
- ☐ Other:

Returning wrestlers with notable achievements

Please list any returning wrestlers on your team with notable achievements. (It is not necessary to list your entire team roster.) Format should be as follows: Wrestler Name (weight) - accomplishment. For example, John Doe (145) - 7th at state in 2019.

Returning Wrestlers

Returning Wrestlers

Never submit passwords through Google Forms.

Google Forms

This content is neither created nor endorsed by Google.



Request for participation

Tournament request: **Battle for the Belt**

The San Marino Wrestling Team is requesting permission to participate in the **Battle for the Belt** tournament in Temecula Valley, CA. We have participated in this event over that last 5 years. We are requesting an overnight stay because varsity level competitions are typically scheduled as two-day events that can span 15+ hours in duration. Providing us with the opportunity to stay overnight will drastically reduce the commute times to and from the event and allow the athletes more time to rest and prepare for their next day weigh-ins and competition. This tournament is also being requested because it will provide the student athletes the opportunity to face competitors from their CIF regional section that they would expect to see during at the post-season Masters event which is a state qualifier.

Eddie Aguirre
San Marino HS Head Wrestling Coach

	Battle for the Belt				
	Revenue				
Items	Number	Hours	Amounts	Total Revenue	
Donation Per Student	0	0	\$ -	\$ -	
Total Revenue				\$ -	
	Expenditures				
Accomodations - Student	10	2	766.6	766.6	
Accommodations - Coaches	3	1	413.3	413.3	
Accommodations - Teacher					
Transportaiton - No Cost			55.59	55.59	
Chaperone Cost					
10% Scholarship Cost					
Contingency - Additional Cost					
Total Expenditures				1235.49	
Expenses paid by Booster				1235.49	