

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 MidCals Date: _____

<p>1. Inclusive dates of trip: 1/16/20 to 1/19/20 <u>1/18/20</u> <i>24</i></p> <p>NOT DURING TESTING</p> <p>() Itinerary attached _____ Principal's Initials</p> <p>3a. Membership of Group: <u>Wrestling</u></p> <p>(e.g., U.S. History class, choral group)</p> <p>4a. Cost of trip financed by: <u>TMWC</u></p> <p>4b. Name of travel agency contracted for trip: (professional travel organization is required) <u>Titan Travel</u></p> <p>4c. Cost per student: <u>0</u> (no student will be excluded from a required trip due to a lack of funds.)</p> <p>() Attached student(s) name and verify funding source</p> <p>5a. Name of certificated employee(s) in charge of trip: <u>Eddie Aguirre</u></p> <p>Responsible for coordinating fundraising, organization, and supervision while students are on SMUSD – sponsored trip</p> <p>5c. Attach names of authorized chaperones on FORM #1 (include relationship to students and/or school)</p>	<p>2. Purpose of trip: Preparation for future competitions</p> <p>() Paragraph attached describing educational value and specific activities students will be required to complete</p> <p>3b. Number of Students Attending: <u>10</u></p> <p>Boys: <u>10</u> Girls: _____</p> <p>4d. Describe fundraising activities, if any:</p> <p>Attachment(s), if any</p> <p>5b. Names of staff members who will provide supervision of students: <u>Jordin Humphrey and Joe Gallardo</u></p> <p>5d. Student/Chaperone ratio: (see attached FORM #1)</p>
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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:

Eddie Aguirre
(Field Trip Coordinator's Signature)

9/27/19
(Date)

[Signature]
(Principal's Signature)

10/20/19
(Date)

[Signature]
(Assistant Superintendent of Instructional Services Signature)

11/1/19
(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): 1/16/20 to 1/19/20 1/18/20 SA

DESTINATION: MidCals

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	M	F	Training Completed
Jordin Humphrey	x		Yes
Joe Gallardo	x		Yes

Classified District Chaperones	M	F	Training Completed

Non-District Chaperones	M	F	Training Completed

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: 1/16/20 to 1/19/20 *1/18/20 EK*

Trip Destination: MidCals

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	EK	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.
9/27/19	EK	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.
9/27/19	EK	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.
9/27/19	EK	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
9/27/19	EK	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.
N/A		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.
9/27/19	EK	7. Send home request for parental approval of student participation. If parent does not sign, student cannot go.
9/27/19	EK	8. Verify insurance coverage to provide personal medical insurance for participating students where required.
9/27/19	EK	9. Secure trip cancellation insurance from travel agency where required.


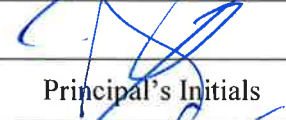
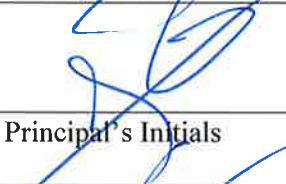
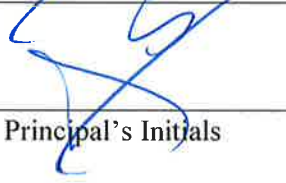

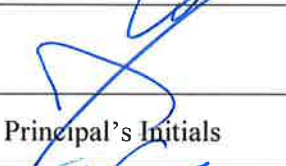
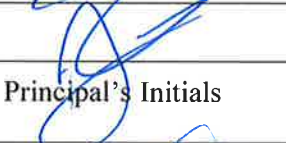
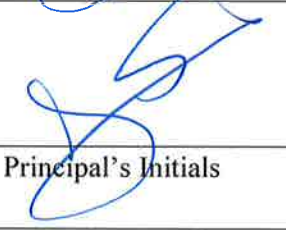
9/27/19	ELC	10. Notify parents of other insurance coverage available as an option.
9/27/19	ELC	11. Provide written evidence of financial ability to cover travel and living expenses for all participants while outside of San Marino.
9/27/19	ELC	12. Verify that permission forms and waivers are returned for all students participating on a field trip. Verify alternate arrangements at school for those students not participating.

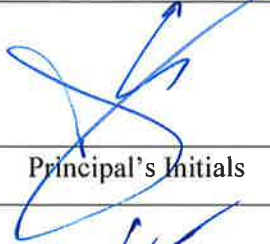
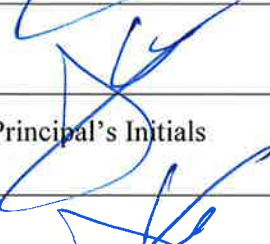
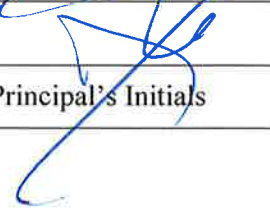
Date Completed	Initials	TWO MONTHS PRIOR TO FIELD TRIP Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.
		13. Field trip coordinator develops orientation plan for students, parents, and chaperones.

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	10/28/15 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	10/29/15 Date
3. Lack of Funds: To help students in need of funds, the following actions are being taken:	 Principal's Initials	10/28/15 Date
4. Return of Funds: Any funds not used for the trip will be returned in the following way:	 Principal's Initials	10/28/15 Date
5. Chaperones: An approved list of chaperones is on file in the main office of the school. (FORM #1)	 Principal's Initials	10/28/15 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	10/28/15 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	10/28/15 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	10/28/15 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>10/28/15</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>10/28/15</u> Date
11. Forward this completed form to the Assistant Superintendent of Instructional Services.	 _____ Principal's Initials	<u>10/28/15</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: 1/16/20 to 1/19/20

Name: Eddie Aguirre

Position: Head Coach

Location: Gilroy, CA

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 MidCals.

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

1/16/20 to 1/19/20.

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, 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 MidCals,
and that I have been asked to accompany these students on their trip during the period from
1/16/20 to 1/19/20.

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)

Joe Gallardo
(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 MidCals,
and that I have been asked to accompany these students on their trip during the period from
1/16/20 to 1/19/20.

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)

Jordin Humphrey
(Signature)

JORDIN HUMPHREY
(Print or Type Name)

2020 Mid California Classic Wrestling Tournament

Please register by submitting this contract with payment and register through link:

<https://www.wrestling.life/midcals-1/>

The below-signed High School agrees to compete in the MID CALS Wrestling Tournament on Friday, January 17 and Saturday, January 18, 2020 at Gilroy High School. Coaches and AD's need to be aware of their school's final exam schedule policy as refunds will not be given. By signing and submitting this contract you are obligated to pay the entry fee in the event of nonattendance

**Entry fee and Contract must be received before Nov. 1, 2019.
After Nov. 1, 2019, a late fee will be assessed, please see below.**

- ☐ **Individual** entry fee, \$50 per wrestler (Late fee \$75)
- ☐ **Boys Team** entry fee, \$400 for 8 or more participating (Late fee \$500)
- ☐ **Girls Team** entry fee, \$400 for 8 or more participating (Late fee \$500)
- ☐ **Both Girls and Boys Team** entry fee, \$500 for both boys and girls teams participating (Late fee \$600)

Format: The tournament is a double elimination format

Dates: Friday, January 17th and Saturday, January 18th

Weigh-Ins: On Friday and Saturday Weigh-ins will begin at 7:00 AM in the Gilroy High Aux Gym (Girls)/Student Center (Boys) and will close at 8:00 AM. Scales will be available at 6:30 AM for wrestlers to check their weights. Groom checks will be done at weigh ins.

Wrestling Info: Coaches Meeting: 8:30 AM/ Wrestling begins at 9:00 AM Boys. Girls at Noon.

Finals: Finals will start approximately at 5:00 PM on Saturday

Awards: 1st, 2nd and 3rd place team trophies; Medals for the top 8 placers and champions receive a backpack. Outstanding wrestler award will be given to lower weights and upper weights. Top 3 teams will receive free admission to next year's Mid Cals tournament.

General Info: Hospitality/ Coaches' lunch on Saturday will be located outside the cafeteria

School:	<i>San Marino HS</i>
Head Coach:	<i>Eddie Aguirre</i>
Cell Phone:	<i>626 373-3760</i>
E-mail Address:	<i>eaquirre103@gmail.com</i>

Principal or Athletic Director Signature _____ Date _____

Checks are payable to "Gilroy High Wrestling" and mail to:
Gilroy High School
Attn: ASB Office (Wrestling Mid-Cals)
750 West Tenth Street
Gilroy, CA 95020

CIF/CCS Sanctioned Tournament and all CIF (California Interscholastic Federation) rules apply

Tournament Director - TBD

Request for participation

Tournament request: **MidCals**

The San Marino wrestling team is requesting the opportunity to participate in the MidCals tournament located in Gilroy, California. Participation in this tournament will afford us the opportunity to wrestle against boys from the central coastal and northern sections of CIF that we expect to see at the Masters and CIF state events. Due to the CIF restrictions placed on high school athletics from competing against preparatory schools, specifically, our restriction from participating in the Ohio Ironman Tournament we feel that participation in this tournament is our best opportunity to compete against elite level national competition. Varsity level competitions are normally scheduled as two day events and due to the distance of this particular event we are requesting an overnight stay.

We thank you for your consideration.

Eddie Aguirre
San Marino Head Wrestling Coach

	MicCal - Gilroy				
	Revenue				
Items	Number	Hours	Amounts	Total Revenue	
Donation Per Student	0	0	\$ -	\$ -	
Total Revenue				\$ -	
	Expenditures				
Accomodations - Student	10	3	1192.98	1192.98	
Accommodations - Coaches	3	2	795.32	795.32	
Accommodations - Teacher					
Transportation - Cost			330.39	330.39	
Chaperone Cost					
10% Scholarship Cost					
Contingency - Additional Cost					
Total Expenditures				2318.69	
Expenses paid by Booster				2318.69	

	MicCal - Gilroy				
	Revenue				
Items	Number	Hours	Amounts	otal Revenue	
Donation Per Student	0	0	\$ -	\$ -	
Total Revenue				\$ -	
	Expenditures				
Accomodations - Student	10	3	1192.98	1192.98	
Accommodations - Coaches	3	2	795.32	795.32	
Accommodations - Teacher					
Transportation - Cost			330.39	330.39	
Chaperone Cost					
10% Scholarship Cost					
Contingency - Additional Cost					
Total Expenditures				2318.69	
Expenses paid by Booster				2318.69	