

Jupiter Environmental Research and Field Studies Academy

Dear JERFSA Freshman and Parents: Welcome to the Academy!

In an effort to get off to a quick start, with as little beginning-of-the-year confusion as possible, we have compiled a whole bunch of paperwork that will have to be addressed sooner or later, and packed it all into this one binder. We've tried to put everything you'll need for future reference into this letter, and all the papers you need to fill out for the year within this binder. We're aware that it's a lot to look over and fill in, but having the information on file will make things much smoother for the rest of the school year.

Off-campus activities are an essential component of the Environmental Academy's academic program. There will be a heavy emphasis on field studies activities, involving excursions into forests, swamps, beaches, and other natural areas for first-hand investigations of natural phenomena. In addition, there will be trips to various resource agencies such as waste management facilities, research centers, etc. The Field Studies Program we envision for our 2024-2025 JERFSA Freshman Class is as follows (subject to modification as opportunities present themselves or as unexpected complications unfold):

Tentative Date	Field Study Activity	Location
September 24 or 25	Waste Management Issues Solid Waste Authority	
October 22	Wildlife Rehabilitation & Plastic Pollution	Loggerhead Marinelife Center
November 11	Coastal Investigations	Coral Cove Park
January 16	Pinelands & Scrub EcoStudies	Jonathan Dickinson State Park
January 30	Tropical Hammock EcoStudy	MacArthur Beach State Park
February 20, 21, & 22	JERFSA Outdoor Experience	J.W. Corbett Wildlife Management Area
March 7	Estuary EcoStudy	MacArthur Beach State Park
Year-round	Water Quality Monitoring	Perry J. Cohen Wetland Laboratory

Most field studies will be morning excursions scheduled when three out of four classes are Academy classes, thus minimizing the impact upon non-Academy coursework. From time to time, full-day (or even longer than one day) field trips will be scheduled. Any time non-Academy classes will be impacted, the teachers will be given advance notice and students will be expected to pre-arrange to make up missed work.

Most of the time, school buses or charter buses will be used to transport students. Sometimes, it will be necessary to recruit parents as volunteer drivers. At no time will ninth or tenth grade students be permitted to drive their own cars, nor will your child be transported in a car driven by a student. Every reasonable effort will be made to ensure your child's safety.

With a field study program as ambitious as this, we have included as many permission forms in advance of the school year as we could. Therefore, you are asked to read and sign ALL included permission forms and waivers consenting to your child's participation in these events during the 2024-2025 school year.

At various times during the year, representatives of the news media (including print, radio, and television) will request permission to cover our Academy activities. The School District allows the news media to visit schools for this purpose. If you object to having your child photographed, filmed, or interviewed by news media representatives, we will take every reasonable precaution to honor your request. Please indicate your preferences on the form provided.



Jupiter Environmental Research and Field Studies Academy

Freshman Class Calendar 2024-2025

Tentative Date	Field Study Activity	Location	Dress Code
September 24 or 25	Waste Management Issues	Solid Waste Authority	JERFSA
October 22	Wildlife Rehab/Plastic Pollution	Loggerhead Marinelife Center	JERFSA
November 11	Coastal Investigations	Coral Cove Park	JERFSA
January 16	Pinelands & Scrub EcoStudies	Jonathan Dickinson State Park	JERFSA
January 30	Tropical Hammock EcoStudy	MacArthur Beach State Park	JERFSA
February 20,21, & 22	JERFSA Outdoor Experience	J.W.Corbett Wildlife Management Area	JERFSA
March 5	Estuary EcoStudy	MacArthur Beach State Park	Aquatic

JERFSA Dress Codes

JHS	Conform to Jupiter High dress code
JERFSA	Academy tee shirt, jeans or modest shorts, standard footwear (no sandals).
Rough	Academy tee; jeans (no shorts); field shoes or boots (NO sandals); insect repellent at cuffs and waistline. (Change of clothes advised.)
Grubby	Work shirt, work shorts or jeans, protective footwear, NO sandals. (Change of clothes advised.)
Aquatic	Academy Tee & modest shorts over bathing suit, wading shoes that cover feet (no sandals), sunscreen applied at least 30 minutes prior. (Change of clothes advised.)
Swimming	Tee over bathing suit, water shoes or sandals, sunscreen applied at least 30 minutes prior. (Change of clothes advised.)
Gym	Academy tee, full-motion gym shorts, athletic shoes (no hard soles, no sandals). (Change of clothes advised.)
Nice	Academy tee or polo shirt, nice pants or shorts, nice shoes. No cut-offs, no mini-skirts, no short shorts, no beach shoes.
Very Nice	Boys: dress shirt and tie, nice pants, nice shoes. Girls: dressy outfit & shoes; no miniskirts or sundresses.

Special Note:

On any excursion involving travel into the field, you should have with you the following items:

- re-useable water bottle and snacks sunscreen sunglasses hat rain gear
- protection from wind or cold in winter
 insect repellent lotion
 pencil
- water shoes will be necessary for certain trips over the next 4 years

Be prepared for unexpected turns in the weather... this is Florida!

Please retain this calendar and post it prominently for future reference.

Jupiter Environmental Research and Field Studies Academy

Freshman Assignments and Forms Checklist

Student's Name	
-------------------	--

Please use this binder for all your assignments and forms.

Be sure you have included all of the following items.

Put things in the order shown below, please.

This page should be the first page in your binder when you turn it in.

Please place check for your Payment of Academy Activity Donation and Tee Shirt in the envelope provided.
Signed Honor Code Contract (double-sided form)
Signed Field Studies/Outings Participation Policy (on back of honor code)
Notarized Medical History/Permission to Treat Form
PB School District Waiver of Liability & Hold Harmless form 2448
PB School District Field Trip Permission form 0755 (there are 7!!)
PB School District Release & Consent for Student Info form 1941
EYCC Rental Use Group Waiver
SWA Consent and Release Form
Student/Parent Directory Info Sheet
Community Service Log You need 200 hours by graduation to get the JERFSA Certificate and Medal!

You MUST bring this binder to the Academy with you on the first day of school...

Monday, August 12, 2024

- Drop off your envelope **BEFORE** going to your **FIRST HOUR**
- To the JERFSA Academy in the 3,000 building



ENVIRONMENTAL SCIENCE CHOICE ACADEMY CONTRACT JUPITER COMMUNITY HIGH SCHOOL

I understand that participation in the Environmental Science Choice Academy Program at Jupiter Community High School is a privilege and I am required to behave in ways that contribute to my academic achievement, support a safe school environment and promote the overall success of the school. This privilege may be revoked if I fail to meet the program's standards for individual effort and student behavior.

As a Choice Program student, I agree to adhere to the following:

Academic Expectations:

- A. I understand I am required to meet the following academic expectations:
 - 1. The student agrees to enroll in the required sequence of courses for the Environmental Science Academy.
 - 2. The student agrees to maintain a cumulative 3.0 HPA in the Environmental Science Academy courses.
 - 3. The student agrees to maintain a cumulative 2.5 high school GPA overall.
- B. I understand I will be placed on Academic Probation if I fail to meet these requirements.

Attendance Expectations:

A. I understand that I will be placed on probation if I have 5 days unexcused absences within a month or 10 days unexcused absences within a 90-day period. Students who continue to accrue unexcused absences while on probation may be dismissed from the Choice Program.

Conduct Expectations:

- **A.** I understand that I must follow school rules as well as the Palm Beach County School District Code of Conduct and my behavior must contribute to my academic success as well as the success of other students at my school.
- **B.** I understand that if I have level two discipline referrals in a marking period I may be placed on probation. A violation of the probation contract may result in dismissal from the Choice Program and assignment back to my zoned school.
- **C.** I understand that if a level three or four code of conduct violation occurs, I will be referred to an Exit Committee that will determine whether I will be dismissed from the Choice Program.

Choice Probation and Exit Process:

Students may be placed on probation if they fail to follow the Choice Program's academic, attendance or conduct expectations. The terms and conditions of probation will vary depending on the individual needs of each student and will be fully outlined in a Probation Contract between the student and the school's administration.

- 1. I understand that failure to correct the cause(s) of probation in the next semester may result in the dismissal from the Choice Program, and If applicable, the school.
- 2. I understand that if I am dismissed from a Choice Program, I will forfeit the right to apply for a Choice Program at this school in the future. If I am not zoned to attend Jupiter High School, I must register at my zoned school.
- 3. If I wish to exit the Choice Program voluntarily and am not an in-SAC student, I must register at my zoned school, regardless of my grade level.
- 4. All exit procedures must follow most recently adopted Board Policy 5.106.

***I have received and reviewed this Choice Student Contract and understand the academic, attendance and conduct expectations of students participating in Choice Programs.

Sign and accept your Environmental Science Academy contract electronically using the Google form:

Environmental Science (JERFSA) Academy Contract Acknowledgement & Agreement



Upon accepting your position in Jupiter Environmental Research and Field Studies Academy (JERFSA) at Jupiter High School (JHS), you elected to join a community of student scholars and educators who are deeply committed to excellence in education and to the highest standard of academic honesty. It is expected that all students will pursue their studies with integrity and honesty... that all work for which a student wants to receive a grade, credit, or recognition will be the work of that individual student.

JERFSA students have the responsibility (1) to uphold the highest standards of academic integrity in the student's own work, (2) to refuse to tolerate violations of academic integrity in the school community, and (3) to foster a high sense of integrity and social responsibility on the part of the Academy as well as in the JHS community.

Violations of the Academic Honor Code will result in severe disciplinary action, which can include, but is not limited to, a grade of zero on the assignment/test, a referral and parental contact, and probationary standing in and possible expulsion from JERFSA.

The following are considered to be egregious infractions of the Academic Honor Code:

I. Cheating

- A. Copying, in part or in whole, from someone else's test or assigned work;
- B. Altering or interfering with grading;
- C. Using or consulting any sources, whether another person, texts, notes, or other writings, or electronic devices (to include cell phones, open tabs on your chromebook) or any other materials not authorized by the instructor; or
- D. Committing other acts that defraud or misrepresent.

II. Plagiarism

- A. Incorporating the ideas, words, sentences, paragraphs or parts of another person's writings without giving appropriate credit, and representing the product as your own;
- B. Representing another's scholarly works such as written assignments or projects as your own;
- C. Submitting a paper purchased from an individual or internet site, or generated by AI; or
- D. Undocumented Web source usage.

III. Other Specific Examples of Academic Dishonesty

- A. Purposely allowing another student to copy from your paper during a test;
- B. Giving your homework, written assignments or other work to another student to plagiarize;
- C. Having another person submit any work in your name;
- D. Lying to the teacher to improve your grade;
- E. Altering a graded work after it has been returned, and then submitting the work for re-grading:
- F. Stealing tests, answer keys, or other materials not intended for your use;
- G. Submitting work of previous JERFSA students/upper classmen as your own work;
- H. Consulting tests and/or other scholarly works of previous JERFSA students/upperclassmen to provide an unfair academic advantage
- I. Forging signatures of parents or others on documents; or
- J. Collaboration without permission of your teacher.

By signing this, I - the student - hereby agree:

- 1. To comply with the above Academic Honor Code in its entirety,
- 2. To uphold the highest standards of integrity, and
- 3. To make the right choices regarding my education in JERFSA.

PRINTED STUDENT NAME	SIGNATURE OF STUDENT	DATE
By signing this, I - the parent/g I understand that my son/daug	guardian - state that I have read the A ghter is solely responsible for his/her a	cademic Honor Code in its entirety. actions and the consequences.
PRINTED PARENT NAME	SIGNATURE OF PARENT	DATE



Academic Honor Code

Upon accepting your position in Jupiter Environmental Research and Field Studies Academy (JERFSA) at Jupiter High School (JHS), you elected to join a community of student scholars and educators who are deeply committed to excellence in education and to the highest standard of academic honesty. It is expected that all students will pursue their studies with integrity and honesty... that all work for which a student wants to receive a grade, credit, or recognition will be the work of that individual student.

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- B. Altering or interfering with grading;
- C. Using or consulting any sources, whether another person, texts, notes, or other writings, or electronic devices (to include cell phones, open tabs on your chromebook) or any other materials not authorized by the instructor; or
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- A. Incorporating the ideas, words, sentences, paragraphs or parts of another person's writings without giving appropriate credit, and representing the product as your own;
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 - A. Purposely allowing another student to copy from your paper during a test;
 - B. Giving your homework, written assignments or other academic work to another student to plagiarize;
 - C. Having another person submit any work in your name;
 - D. Lying to the teacher to improve your grade;
 - E. Altering a graded work after it has been returned, and then submitting the work for re-grading;
 - F. Stealing tests, answer keys, or other materials not intended for your use;
 - G. Submitting work of previous JERFSA students/upper classmen as your own work;
 - H. Consulting tests and/or other scholarly works of previous JERFSA students/upperclassmen to provide an unfair academic advantage
 - I. Forging signatures of parents or others on documents; or
 - J. Collaboration without permission of your teacher.

By signing this, I - the student - hereby agree:

- 1. To comply with the above Academic Honor Code in its entirety,
- 2. To uphold the highest standards of integrity, and
- 3. To make the right choices regarding my education in JERFSA.

Turn in the signed copy of this policy statement.

Keep this copy as a reminder of the expectations you and your child have agreed to meet regarding the Academic Honor Code.

Jupiter Environmental Research and Field Studies Academy 2024-2025 Student Medical Information and Consent to Treat Form

Student Informa	ition.			
Name:	Date of Birth:			
Best daytime parent	t phone number: Home Phone		Home Phone:	
Street Address:				
City, State, Zip:				
Parents/Guardia	n Information:			
	Father	Mother	Guardian	
Name				
Home Address				
Home Phone				
Business Name				
Business Phone				
Health Insurance	e Information			
Insurance Company I	Name:			
Address:				
City, State, Zip:				
Claims Phone Number	er:			
Name of Insured:				
Policy/Group Numbe	er:			
IMPORTANT: PI	ease attach photocop	y of both front an	d back of INSURANCE CARD	
Health History				
Doctor:	Phone:	Hos	pital Preference:	
Please check eve	ery applicable condi	tion listed below	/ :	
Arthritis	Fainting s	pells	Medicine Allergies	
Asthma	Hypoglyc	emia	Aspirin	
Cardiac	Other:		Penicillin	
Convulsions	Other:		Sulfa	
Diabetes	Other:		Other:	
Epilepsy	Other:		Other:	
	(to foods, bee sting	s, etc.)		
Allergy:	Treatment:			
Allergy:	Treatment:			
	iring regular medica	al attention:		
Condition (name & e	explicit description):			
Regular Medication:				
Dosage: Frequency:				
Condition (name & explicit description):				
Regular Medication:				
Dosage:	Frequ	ency:		
IMPORTANT: Ye	ear of last Tetanus shot			

SCHOOL DISS

THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Release/Waiver of Liability and Hold Harmless Agreement for a Minor

(Participant Under 18 Years of Age)

Directions: Complete this form and return it to your child's school.
L, as parent/guardian of
have been informed and know the risks involved in participating in this
In consideration for being allowed to participate in the
NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN
READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT EVEN IF THE SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE A RIGHT TO REFUSE TO SIGN THIS FORM AND THE SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.
I HAVE READ THIS CAREFULLY, UNDERSTAND IT, AND KNOW IT CONTAINS A RELEASE/WAIVER OF LIABILITY.
Parent/Guardian Signature Date Parent/Guardian Print Name

PBSD 2448 (New: 03/12/2012) RECORD COPY - School



	Elementary School
	Middle School
X	High School

Single Day Field Trip Permission/Release

SECTION I - TRIP INFORMATION								
School Name		School C	ontact				School Conta	act Phone #
Jupiter High School Jessamyn Ra			n Ramsey				561-743-6005	
Teacher Name		Grade						
J. Ramsey, A. Lichtig, T. Thornton			9					
Departure Date		Return Date		Approximate Re	7		Cost Per S	Student*
	X A.M ☐ P.M.	9/24/24 01	9/25/24	12:45	A.M	X P.M.		0
Destination Solid Waste Authority		⊠In-county	Out-of-c	ounty Numbe Male	r Of Chaperon 1 Fema		Oriver(s)	Student
Method(s) Of Travel (check all that apply	<u></u>						[7]	
School Bus Private Chart	ter Bus Walking	Private V	'ehicle***	X Other (sp	ecify) scho	ool district	vehicle	
Purpose For Trip								
Tour Solid Waste Authority facilit	ies to learn about susta	inable land us	e and waste	management	strategies			
Description Of Supervision On Trip +								
Will be supervised by JERFSA tea	ichers, staff, parent vol	unteers, and/o	r agency pr	ofessionals				
Attach any additional pages, if need * No penalty of any type will be imparticipate for failure to pay for thinsufficient funds to cover the cost *** Each person transporting the stuthe parent(s)/guardian(s) of the strequirements as specified by FL + Describe the circumstances or timparents are encouraged to ask a SECTION II - PARENT / LEGAL GL	posed against the studer ne field trip. The principal st of the item or activity. dents in a private vehicle student traveling in the ve Statute 627.736 and con nes that the student will land iny questions about supe	nt based upon I may forgo a p This request is must show prehicle upon recomplete the PBS NOT be supen	a failure to p lanned activ for a volunta oof of currer quest. Volunt D 2362 Voluvised by scho	ay for the field ty or use of a iry payment. t automobile li eer drivers are nteer Driver Ir	trip. No stude particular ite ability insura required to aformation.	m based uance to the carry mini	school sup mum insura	lection of ervisor and to nce
	JARDIAN APPROVAL							
Student Name (last, first, middle initial)		Student F	lome Address					
Home Phone #	Business Phone #		Cell Phone #					
	Dubinoss Friend II		Cell I Horie #			Emergenc	y Pnone #	
Physician's Name	Phy:	sician's Phone #	<u> </u>	Student	Swimming S	kill Level (i	f annlicable)	
•	,				on-swimme		eginning	Skilled
Other Student Information (allergies, me	dications, etc., attach PBS	D 2649)				eal(s) Provi		
						∏Ву Ра		By School
I agree and my child agrees to abid risks areinherent. I understand that associated with traveling in the above whether the dangers are open and am participating in these activities or hazards associated with the field trip subject to the limits of Section 768.2 volunteer drivers. I further agree to hold harmless the School District for contact the parent. This would not pemergency medical treatment for Check here if the student wears	this field trip activity may be chosen method of transport of my own free choice. If my own free choice, if my own free choice, if my own free choice. If p in which my child will 28, Florida Statutes, Baaccept responsibility for all costs, damages and prevent the emergency of my child in the event	ay involve cert avel or those a Any questions My signature a be participation ased on current ar any negliger and attorneys for health care pr	eain condition associated with the section of the s	ns, hazards a vith the faciliti occurred to resthat I have ool District rew, the School intentional actional actions in the acting in the	nd potentia ies or prope me have be been inforn cognizes its I Board is no t of my child ergency, re best interes	I dangers, erty where en answe ned of the responsil ot respons d and as a	including to the field tri red to my so reasonably bility for its sible for the result will	s trip certain hose p will occur or ratisfaction. I y expected negligent acts negligence of indemnify and
Signature of Emancipated Student	Date		Sign	ature of Parent/	Guardian		Da	te
			Sign	ature of Parent/	Guardian			4.



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

SCHOOL DISTRICT OF PALM BEACH COUNTY	☐ Elementary School
CHIEF ACADEMIC OFFICE	Middle School
ay Field Trip Permission/Release	

Single Da Permission is requested for your child (student) to go on a single day field trip. To give permission for your child to attend this field trip, complete

the information in Section II. Return the completed Single Day Field Trip Permission/Release to the teacher named below along with payment* if
there is a charge. If this Single Day Field Trip Permission/Release is not returned, your child will not be permitted to attend. This form must be
signed by the parent(s)/guardian(s) and student, if over 18 years of age. Both parents should sign if feasible

SECTION I - TRIP INFORMA		,	ger Dear parer	is should sign if leasible	•
School Name Jupiter High School		100000000000000000000000000000000000000	ol Contact Imyn Ramsey		School Contact Phone # 561-743-6005
Teacher Name J. Ramsey, A. Lichtig, T. Th	ornton	Grade	9		
- oparitar o Dato	ture Time 8:30 X A.M F	P.M. Return Da	te)/22/24		Cost Per Student*
Destination Loggerhead Marinelife Center		⊠In-cour	nty Out-of-o	ounty Number Of Chaper	
	of apply) Charter Bus Walki	ng Privat	e Vehicle***	○ Other (specify) scl	nool district vehicle
Purpose For Trip Learn about conservation iss	ues and wildlife rehabili	tation			
Description Of Supervision On Tri Will be supervised by JERFS	51	volunteers, an	d/or agency pi	ofessionals	
participate for failure to pay insufficient funds to cover it *** Each person transporting the the parent(s)/guardian(s) or requirements as specified	be imposed against the sty for the field trip. The prin the cost of the item or active the students in a private veof the student traveling in the prince of the student traveling in the student traveling in the price of the student the student of ask any questions about	tudent based up cipal may forgo vity. This reques thicle must show he vehicle upon d complete the F will NOT be supervision on the complete on the supervision on the complete on the supervision on the complete of the compl	on a failure to pa planned activate is for a volunt proof of currer request. Volun PBSD 2362 Voluctivised by sch	ay for the field trip. No str ity or use of a particular it ary payment. It automobile liability insu teer drivers are required to unteer Driver Information.	udent shall be denied the right to tem based upon the collection of rance to the school supervisor and to carry minimum insurance
Student Name (last, first, middle in			nt Home Addres	S	
Home Phone #	Business Phone #		Cell Phone	#	Emergency Phone #
Physician's Name		Physician's Phor	ne #	Student Swimming Non-swimm	Skill Level (if applicable) erBeginningSkilled
Other Student Information (allergie	es, medications, etc., attach	PBSD 2649)			Meal(s) Provided By Parent By School
risks areinherent. I understand associated with traveling in the whether the dangers are oper am participating in these active hazards associated with the fissubject to the limits of Section volunteer drivers. I further agr	d that this field trip activit e above chosen method n and obvious or conceal rities of my own free choi ield trip in which my child n 768.28, Florida Statutes ree to accept responsibilitrict for all costs, damage d not prevent the emerge ent for my child in the e	y may involve of travel or tho ed. Any questicce. My signaturate will be participes. Based on curty for any neglics and attorneyency health care	certain conditions associated ons which have acknowledge ating. The Schrent Florida Lagent, willful, or s fees. In the seprovider from	ens, hazards and potenti- with the facilities or prope e occurred to me have be es that I have been infor- tool District recognizes in aw, the School Board is intentional act of my che event of an emergency, in acting in the best interes	perty where the field trip will occur or een answered to my satisfaction. I rmed of the reasonably expected its responsibility for its negligent acts not responsible for the negligence of ild and as a result will indemnify and reasonable attempts will be made to
Signature of Emancipated Student	Date		Sign	nature of Parent/Guardian	Date
			Sign	nature of Parent/Guardian	Date



☐ Elementary School

Single Day Field Trip Permission/Release

SECTION I - TRIP INFORMATION	adding it over 10 year	aro or age. Both p	arents snould	sign in leasible.		
School Name		School Contact	05.20000		School Contact Phone #	
Jupiter High School Teacher Name		Jessamyn Ram	sey		561-743-6005	
J. Ramsey, A. Lichtig, T. Thornton		Grade 9				
Departure Date Departure Time	De	eturn Date	Approxima	te Return Time		_
11/11/24 8:40	A.M P.M.	11/11/24	12:4	5 🔲 A.M	Cost Per Student* O	
Destination Coral Cove Park	\boxtimes	In-county Out	ot-county I	mber Of Chaperon ale I Fema		
Method(s) Of Travel (check all that apply)	9		77			-
School Bus Private Charter Bus	Walking	Private Vehicle*	* ⊠Other	(specify) scho	ol district vehicle	
Purpose For Trip						
Participate in coastal ecostudy						
Description Of Supervision On Trip +				*		\dashv
Will be supervised by JERFSA teachers,	staff, parent volunte	ers, and/or agenc	y professiona	ls		
Attach any additional pages, if needed, inc * No penalty of any type will be imposed a participate for failure to pay for the field insufficient funds to cover the cost of the *** Each person transporting the students in the parent(s)/guardian(s) of the student requirements as specified by FL Statute + Describe the circumstances or times tha Parents are encouraged to ask any que SECTION II - PARENT / LEGAL GUARDIA	against the student ba trip. The principal may e item or activity. This n a private vehicle mu- traveling in the vehicle 627.736 and complet t the student will NOT stions about supervisi	sed upon a failure y forgo a planned request is for a vo st show proof of ce e upon request. Vo te the PBSD 2362	to pay for the activity or use luntary payme urrent automoblunteer drivers Volunteer Driv	field trip. No stud of a particular iter ent. oile liability insurals are required to over Information.	n based upon the collection of nce to the school supervisor and to carry minimum insurance	
Student Name (last, first, middle initial)	MIT TO VAL	Student Home Ad	dress			_
Home Phone # Busine	ess Phone #	Cell Pho	ne #		Emergency Phone #	
Physician's Name	Physician	n's Phone #	Stu		till Level (if applicable)	
				Non-swimmer		
Other Student Information (allergies, medication	s, etc., attach PBSD 26-	49)		Me	al(s) Provided By Parent By School	
I agree and my child agrees to abide by al risks areinherent. I understand that this fie associated with traveling in the above chose whether the dangers are open and obvious am participating in these activities of my or hazards associated with the field trip in wh subject to the limits of Section 768.28, Flor volunteer drivers. I further agree to accept hold harmless the School District for all co contact the parent. This would not prevent emergency medical treatment for my child Check here if the student wears a medical treatment.	id trip activity may in sen method of travel is or concealed. Any with free choice. My so ich my child will be prida Statutes. Based responsibility for any sts, damages and at the emergency heal hild in the event of a	or those associal questions which light acknowledged acknowledged articipating. The on current Floridy negligent, willfuttorneys fees. In the care provider it	ditions, hazar ted with the fanave occurred edges that I he School District Law, the School or intentionance event of an acting in	ds and potential acilities or proper d to me have been informat recognizes its chool Board is not all act of my child nemergency, reat the best interest	aware that during this trip certain dangers, including those ty where the field trip will occur or answered to my satisfaction. I ed of the reasonably expected responsibility for its negligent act responsible for the negligence and as a result will indemnify an asonable attempts will be made to	ts of
Signature of Emancipated Student	Date	_	Signature of Pa	rent/Guardian	Date	
			Signature of Pa	rent/Guardian	Date	



Liementary School	
☐ Middle School	

Single Day Field Trip Permission/Release

SECTION I - TRIP INFO	ORMATION											
School Name	School Contact			School Cont	act Phone #							
Jupiter High School				Jessamyn Ran	isey				561-743-6	005		
Teacher Name J. Ramsey, A. Lichtig,				Grade 9								
Departure Date	Departure Time			turn Date	Ар	proxin	nate Return			Cost Per S	Student*	
1/16/25	8:40	× A.M □ F	P.M	1/16/25			:45		⊠ P.M.		0	
Destination Jonathan Dickinson St				n-county 🔀 Ou	t-of-cou	inti/	Number Of C Male 1	Chaperon Fema		Driver(s)	Student	
Method(s) Of Travel (check	k <i>all that apply)</i> Private Charter	r Bus Walki	ing 🔲	Private Vehicle	*** >	⊘ Oth	er (specify) scho	ol district	vehicle		
Purpose For Trip												
Observe and explore the	ne flatwoods a	and scrub ecosyst	tems									
Description Of Supervision	On Trip +											
Will be supervised by	JERFSA teacl	hers, staff, parent	t voluntee	ers, and/or agen	cy prof	essio	nals	-				
* No penalty of any ty participate for failure insufficient funds to *** Each person transporthe parent(s)/guardi requirements as sperior the circumparents are encouraged.	pe will be impose to pay for the cover the cost orting the stude an(s) of the stude cified by FL SI stances or time aged to ask any	osed against the sign field trip. The print of the item or activents in a private very dent traveling in the tatute 627,736 and the student y questions about	tudent bas icipal may vity. This i chicle mus he vehicle d complete will NOT supervision	sed upon a failur forgo a planned request is for a v st show proof of e upon request. V e the PBSD 236, be supervised b	e to pay activity coluntary current a foluntee Volunt	for the or us a payment of the payme	ne field trip. e of a partionent. obile liabiliters are required.	No stud cular iter by insura uired to contact	m based unce to the carry mini	school sup	llection of pervisor and to ance	
SECTION II - PARENT		ARDIAN APPROV	/AL	r								
Student Name (last, first, n	niddle initiar)			Student Home A	ddress							
Home Phone #	E	Business Phone #		Cell Pl	Cell Phone #					y Phone #		
Physician's Name			Physician	's Phone # Student Swimming S			mming SI	I Skill Level (if applicable)				
•				□Non-swimm								
Other Student Information	(allergies, medic	cations, etc., attach	PBSD 264	19)	Meal(s					s) Provided		
									□Ву Ра	arent	By School	
I agree and my child agrisks areinherent. I under associated with travelin whether the dangers ar am participating in thes hazards associated with subject to the limits of S volunteer drivers. I furthold harmless the Schoontact the parent. This emergency medical transcription.	erstand that the grin the above e open and obe activities of a the field trip section 768.28 are agree to act old District for a would not preeatment for ne	nis field trip activite chosen method ovious or conceal my own free choi in which my childs, Florida Statutes all costs, damage event the emerge my child in the e	ty may involved the control of travel led. Any control of the cont	volve certain co or those associ questions which gnature acknow articipating. The on current Flori r negligent, willf torneys fees. In th care provider	nditions ated with have of vledges e School da Law ul, or in the ever	th the eccurrenthat bl Dist the stention ent of	ards and p facilities o ed to me h I have been trict recogn School Boa nal act of r an emerge in the best	otential or prope have been informatizes its ard is not my child ency, reinteres	dangers rty where en answe ned of the responsi of respon- and as a asonable	, including the field to ered to my sereasonable bility for its sible for the aresult will attempts were the first t	those ip will occur or satisfaction. I y expected negligent acts e negligence of indemnify and vill be made to	
Signature of Emancipated S	tudent	Date			Signati	ure of	Parent/Guard	dian		Da	ate	
					Signat	ure of	Parent/Guard	dian			ato	



	Elementary School
	Middle School
X	High School

Single Day Field Trip Permission/Release

SECTION I - TRIP INFO	ORMATION										
School Name Jupiter High School					School C Jessam	ontact yn Ramsey	90			School Conta	
Teacher Name J. Ramsey, A. Lichtig,	T. Thornton				Grade	9					
Departure Date 1/30/25	Departure Tim 8:30	ie × A	M 🔲 P.	.M. Re	turn Date 1/30	/25	1	timate Return Time	И 🔀 Р.М	Cost Per S	student*
Destination MacArthur Beach Stat	e Park				n-county	Out-of-	county	Number Of Chape Male 1 Fer		Driver(s)	Student
Method(s) Of Travel (check	k all that apply) Private Charte		Walkin	g [Private \	/ehicle***	XIO.		thool distric		
Purpose For Trip Investigate the tropical	l hammock e	cosystem									
Description Of Supervision	•				-						
Will be supervised by	JERFSA tead	chers, stat	ff, parent v	volunte	ers, and/o	or agency p	rofessi	onals			
* No penalty of any ty participate for failure insufficient funds to ** Each person transporthe parent(s)/guardirequirements as specific to the circums parents are encouraged.	pe will be impe to pay for the cover the cosporting the studen(s) of the studentified by FL stances or time	osed againg field trip. It of the ite lents in a part travent travestatute 62 in the statute 62 in the statute 62 in the statute 62 in the statute 64 in the	inst the stu. The princien or activity private vehuseling in the 7.736 and of e student went.	dent bas ipal may ty. This icle mus e vehicle complet vill NOT	sed upon of forgo a prequest is show preduced upon reduced the PBS be super	a failure to planned action for a volunt of currequest. Volur SD 2362 Vowised by scl	pay for vity or utary payent auto nteer dr	the field trip. No st use of a particular i yment. mobile liability insuivers are required Driver Information	item based urance to the to carry min	I upon the coll ne school sup nimum insura	lection of ervisor and to nce
SECTION II - PARENT					on on the						
Student Name (last, first, n	niddle initial)				Student H	lome Addres	SS				
Home Phone #		Business F	Phone #			Cell Phone	#		Emergen	ncy Phone #	
Physician's Name			F	Physician	's Phone # Student Swimming S				L Skill Level <i>(if applicable)</i> er Beginning Skilled		
Other Student Information	(allergies, med	lications, et	tc., attach P	BSD 264	49)			1 🖰	Meal(s) Pro	ovided	By School
I agree and my child agrisks areinherent. I under associated with travelin-whether the dangers are am participating in these hazards associated with subject to the limits of S volunteer drivers. I furth hold harmless the Schocontact the parent. This emergency medical transfer is the students.	erstand that to g in the above open and commended activities of a the field trip section 768.2 Her agree to a sool District for a would not preatment for	his field to be chosen by own my own in which 8, Florida accept res all costs, revent the my child	rip activity method of conceale free choice my child v Statutes, sponsibility damages e emergen in the eve	may involved travel d. Any of travel d. Any of the end	volve cer or those questions ignature a carticipating on currer or negliger torneys feth care propertions.	tain conditi associated which hav acknowled ng. The Sc nt Florida L nt, willful, o ees. In the rovider fror	ons, had with the occurrence occu	azards and potent ne facilities or pro- rred to me have to t I have been info- strict recognizes a School Board is ional act of my choof an emergency, g in the best inter-	ial danger perty wher peen answermed of thits responsible not responsible and as reasonable	nat during things, including the the field trivered to my some reasonably sibility for its insible for the sea result will be attempts were	s trip certain hose p will occur or catisfaction. I y expected negligent acts negligence of indemnify and
Signature of Emancipated S	tudent		Date		_	Sig	nature c	of Parent/Guardian		Da	te
						Sig	nature o	of Parent/Guardian		Da	te



Multiday Field	Trip	Permissio	n/Release
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☐ Elementary School
☐ Middle School
⊠ High School

Permission is requested for your child (student) to go on a multiday field trip. To give permission for your child to attend this field trip, complete the information in Section II. Return the completed Multiday Field Trip Permission/Release to the teacher named below along with payment* if there is a charge. If this Multiday Field Trip Permission/Release is not returned, your child will not be permitted to attend. This form must be signed by the parent(s)/guardian(s) and student, if over 18 years of age. Both parents should sign if feasible.

Parents are encouraged to direct all questions to the school contact (see below) regarding any and all trip details.

SECTION I - TRIP INFORMATIO	N			, - 5		a an arp aotano.				
School Name Jupiter High School			School O Jessam	Contact yn Ramsey	у			School Conta		
Teacher Name J. Ramsey, A. Lichtig, T. Thornt		Grade 9		Duration umber of:	Days [3 Nights	s 2		night Trip**	
Departure Date 2/20/25 2:30	S BANDON S	P.M.	eturn Date 2/22	2/25	202	mate Return Time 3:00	M × P.W		0	
Destination Everglades Youth Conservation Method(s) Of Travel (check all that app			⊠in-co	ounty 🔲	out-of-co	untyout-of-c	Ountry	mber Of Chape ale 2 F	erones emale 4	
School Bus Private Cha		king _	Private \	Vehicle***	⊠Otl	her (specify) s	chool distric	ct vehicle		
Driver(s) Adult Student EYCC	cabins				pose For itdoor Re	Trip esouces Intensiv	e		_	
Room assignments for overnight	odging XARE	ARE NO	OT sepa	rated by bi	ological	sex at birth.				
Description Of Supervision On Trip + Chaperones will be in cabins wit	h the students									
Attach any additional pages, if nee * No penalty of any type will be in participate for failure to pay for insufficient funds to cover the c ** In the event of an overnight trip *** Each person transporting the si the parent(s)/guardian(s) of the requirements as specified by F + Describe the circumstances or SECTION II - PARENT / LEGAL C	mposed against the s the field trip. The print cost of the item or act o, students may not be tudents in a private vi- e student traveling in the L Statute 627.736 and times that the studen	student ba ncipal may ivity. This ee supervis ehicle mus the vehicle id complet it will NOT	sed upon y forgo a request is sed while st show p e upon re te the PB	a failure to planned act s for a volur in assigned roof of curr quest. Volu SD 2362 Vo	pay for to tivity or use ntary pay d rooms. ent auton nteer driv blunteer [he field trip. No s se of a particular ment. nobile liability insi vers are required Driver Information	item based urance to the to carry min	l upon the col ne school sup nimum insura	ervisor and to	
Student Name (last, first, middle initial)			Student	Home Addre	ess					
Home Phone #	Business Phone #			Cell Phone #			Emergen	Emergency Phone #		
Physician's Name		Physician	n's Phone	#	Student Swimming					
Other Student Information (allergies, m	edications, etc., attach	PBSD 264	49)			Non-swimr	Meal(s) Pro	Beginning ovided Parent	Skilled By School	
I agree and my child agrees to abrisks are inherent. I understand the associated with traveling in the abwhether the dangers are open and amparticipating in these activities hazards associated with the field the subject to the limits of Section 768 volunteer drivers. I further agree to hold harmless the School District to contact the parent. This would not emergency medical treatment for Check here if the student wear signature of Emancipated Student	at this field trip active ove chosen method devious or conceated of my own free choring in which my child accept responsibilition all costs, damage prevent the emerge or my child in the extra content of the core of the cor	rity may in a firavel of travel of travel of the control of the co	nvolve ce or those questions ignature participati on curre y neglige torneys f th care p	rtain condi associated s which har acknowled ng. The So nt Florida I nt, willful, c ees. In the rovider fro or illness	tions, had with the ve occur lges that chool Dis aw, the or intention event of macting during	zards and poter e facilities or pro red to me have l I have been info strict recognizes School Board is onal act of my ch an emergency, in the best inter	m aware the strain and a strain and a strain and as the strain and	nat during thing re, including re the field trivered to my some reasonably sibility for its a result will enable for the	s trip certain those p will occur or atisfaction. I y expected negligent acts negligence of indemnify and rill be made to orize	
	170 (27.0.7.0)							Da	:C	
				Si	anature of	Parent/Guardian		Da	to	



☐ Elementary School
☐ Middle School
X High School

Single Day Field Trip Permission/Release

SECTION I - TRIP INFORMATION										
School Name			School Co					School Co	ntact Phone #	
Jupiter High School			Jessamyn Ramsey					561-743-	-6005	
Teacher Name J. Ramsey, A. Lichtig, T. Thornton	1		Grade	9						
Departure Date Departure Tin		Re	turn Date		Approxi	mate Return Tin	ne	Cost Per	r Student*	
3/7/25 7:30	X A.M ☐ F	⊃.M.	3/7/	25	12	2:45	A.M X P.	.M.	0	
Destination			n nounts	□Out of a	a until	Number Of Cha	perones	Driver(s)		
MacArthur Beach State Park			n-county	Out-of-o	county	Male 1 F	emale 2	✓Adult	Student	
Method(s) Of Travel (check all that apply										
School Bus Private Chart	er Bus Walki	ing	Private V	ehicle***	× Oth	ner (specify)	school dist	rict vehicle		
Purpose For Trip										
Study the estuary ecosystems										
Description Of Supervision On Trip +										
Will be supervised by JERFSA tea	chers, staff, parent	t volunte	ers, and/o	r agency p	ofessio	nals				
Attach any additional pages, if need * No penalty of any type will be imparticipate for failure to pay for the	posed against the st	tudent ba	sed upon	a failure to	ay for t	he field trip. No	student sh	nall be denied	the right to	
insufficient funds to cover the cos	st of the item or acti	vity. This	request is	for a volunt	ary pay	ment.				
*** Each person transporting the stu- the parent(s)/guardian(s) of the s requirements as specified by FL	student traveling in the	he vehicle	e upon rec	quest. Volun	teer driv	ers are require	ed to carry r	the school s minimum insu	upervisor and to irance	
Describe the circumstances or tir Parents are encouraged to ask a	nes that the student	t will NOT	be super	vised by sch				t supervisors	will be present.	
SECTION II - PARENT / LEGAL GU	IARDIAN APPROV	/A1								
Student Name (last, first, middle initial)	, ((B), ((7), (1), (6), (6), (6), (6), (6), (6), (6), (6	V/1L	Student F	Home Addres	s					
, , , , , , , , , , , , , , , , , , ,										
Home Phone #	Business Phone #			Cell Phone	#		Emerg	ency Phone #		
Physician's Name	J	Physician	n's Phone #	# Student Swimming Skill Le			ning Skill Lev	(el (if applicable)		
Filysician's Name		Trysicial	15 FIIOTIE #	Non-swimmer			Beginning Skilled			
Other Student Information (allergies, me	dications etc attach	PBSD 26	49)	Meal(s)						
oner statem internation (unorgios, me	aroundrio, oto., unuori	7 202 20	13)					/ Parent	By School	
I agree and my child agrees to abid risks areinherent. I understand that associated with traveling in the abo whether the dangers are open and am participating in these activities chazards associated with the field tri subject to the limits of Section 768. volunteer drivers. I further agree to hold harmless the School District for contact the parent. This would not pemergency medical treatment for Check here if the student wears	this field trip activity ve chosen method obvious or conceal of my own free choice prince in which my child accept responsibility all costs, damage prevent the emerger my child in the endical alert	ty may in of travel led. Any ice. My s d will be ps. Based ity for any es and at ency heal	volve cer or those questions ignature a participating on currery negliger torneys fath care p	tain condition associated which have acknowledg ng. The Scient Florida L nt, willful, on ees. In the rovider fron or illness	ons, ha with the e occur ges that nool Dis aw, the r intenti event on acting during	zards and pot e facilities or p red to me hav I have been i strict recogniz School Board onal act of my f an emergen in the best in this field trip	ential dang property whate been and informed of es its respond d is not respond to child and cy, reasonal terests of to.	pers, including the field swered to my fithe reasonal onsibility for it ponsible for the as a result wable attempts	this trip certain g those trip will occur or y satisfaction. I ably expected ts negligent acts the negligence of till indemnify and s will be made to	
Signature of Emancipated Student	Date			Sig	nature o	f Parent/Guardia	ın		Date	
				Sig	nature o	f Parent/Guardia	n		Date	



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Release and Consent for Student Information Publication

Parents (including legal guardians) are required to provide written permission to their child's school if they wish to:

1) allow their child to participate in school activities and the School District to publish the student's name, school name, grade level, photograph, video image, art work, writing, etc. in annual yearbooks, graduation programs, web sites, school newspapers, approved news gatherings, releases and articles, etc.

AND

2) allow publication to the public of certain specified information (such as honors received) related to their child.

DIRECTIONS: If this is a blanket consent for all student publications throughout the school year, the parent will check the appropriate box and provide the school year. If a one-time release and consent for a special project is required, the parent will check the special release box and list below the name of the special project publication. The parent will sign and return to the student's school.

Student ID #	Student Name (first, middle initial,	last)	Grade
School Name	8	School Contact	Contact Phone Number
Parent/Guardian Name			
TYPE OF CONSENT (chec	ck one only)		
I hereby give permissic school name, participa diplomas and awards r programs, playbills, scl school or District appro school or District to the public announcement of	tion in officially recognized activities received, date and place of birth, an hool productions, web sites, social in the productions was released in the productions and interviews, released media and governmental entities of recognition of my student's accort	polications for school year	ams, dates of attendance, books, graduation red publications or in for the release by the child has received for permission box my child's
special release and cor	nsent for the student information pu	blication listed below:	
I hereby give permission	on for the school or District to use m school name, etc. i	y child's photograph, video image, writing, voice record n the special production named above.	ing, name, grade level,
I also understand the produ Television (ITV), The Edu the appropriate trade.	uction, publication, presentation or recation Network (TEN), a film festive	materials may be submitted for classwork, for open broad al or contest or any other display according to the broad	idcast by <i>Instructional</i> lcast/ publication rules of
School District of Palm Bea	Beach County shall have the right ach County so desires. This agreem agreement is made without restriction	to sell, duplicate, reproduce or make other use of such nent is given with free knowledge of the rights transferre ons or time limits.	rights transferred as The d to the School District of
I give permission for t	the consent request indicated above	e.	
I do not give permission	on for the consent request indicated	above.	
	Signature of Parent/Guardian or En (including if age 18 or over - proof of		_





EYCC RENTAL USE GROUP WAIVER

(Please complete one waiver for each person)

Name_			, and the second	(Circle One)	Male / Female	Adult / Child
We col	lect demograph	nic information	to use for grants	to continue our	programs. Please c	ircle one (optional):
	White	Black	Hispanic	Asian	Other	
Address	5					
City	подажние под		A UK AND AND A CONTRACT OF THE		State	ZIP
Telepho	one (Home)		Telephone (C	ell):	- Andrew	
In case	of emergency, n	otify:				
Name_						
Addres	S		A CONTRACTOR OF THE STATE OF TH			
City	and parameters as a second	mulativation multiplication is a second second		State	e de particular de la companya de l	ZIP
Teleph	one (Home):		-2-11-11-11-11-11-11-11-11-11-11-11-11-1	Telephone (Cell):		The state of the s
			ASS	UMPTION OF RIS	K	
aware rental i physica	that during planuse group or orga	ned activities a anization at the ontact with wate	nd/or instruction of Everglades Youth C er, plants, insects a	courses, that I am onservation Camp	participating in und , certain dangers may	les Youth Conservation Camp. I am er the arrangements made by my occur, including but not limited to ors activities, and any type of labor
Evergla Youth its emp	ades Youth Consider Conservation Carologues, agents,	ervation Camp, mp, Florida Fish officers, and vol	I will and do herel and Wildlife Conse unteers harmless f	by assume all of the rvation Commission from and against a	ne above mentioned on, Florida Wildlife Fo ny and all liability, ac	d activities arranged for me at the risks, and will hold the Everglades bundation, the State of Florida and ctions, causes of actions, debts and participation in these activities.
Signat	ure (parental sig	nature required	if participant is un	der 18) Organ	nization	
Date:						



of Palm Beach County

INFORMED CONSENT, RELEASE, INDEMNITY AGREEMENT AND AUTHORIZATION As of June 30, 2023

Event or Activity Name:	

Field Experiences:

Grades 3 & 7:

Students will be outdoors on the SWA Greenway Trail System where they will learn about the Everglades Ecosystem, animal, and plant interactions, and how they relate to the Solid Waste Authority. They will see first-hand how industry and nature coexist. This includes a one-mile walk. We recommend bringing bug spray and sunscreen.

Grades 4 & 6:

Participants will engage in a fun, educational experience as they learn about the waste-to-energy process while exploring the Education Center and other facilities, including the Recovered Materials Processing Facility (recycling center). Students will learn how the SWA manages Palm Beach County's waste, why recycling is important, and what they can do to help. Long pants are recommended.

Participants will engage in a fun, educational experience as they learn about the waste-to-energy process and test their knowledge using a touchscreen interactive tabletop game. During the program, participants will be escorted behind the scenes at SWA Renewable Energy Facility 2. The tour includes an up-close view of the refuse pit, where most of Palm Beach County's trash ends up, as well as the claws that hold nine tons of garbage at a time and the operators who manage them. Long pants are required.

High School:

Participants will engage in a fun, educational experience as they learn about the waste-to-energy process and test their knowledge using a touchscreen interactive tabletop game. During the program, participants will be escorted behind the scenes at SWA Renewable Energy Facility 2. The tour includes an up-close view of the refuse pit, where most of Palm Beach County's trash ends up, as well as the claws that hold nine tons of garbage at a time and the operators who manage them. Depending on the arrangements, there may also be a driving tour to see additional facilities such as Renewable Energy Facility 1, Utilities, Maintenance, the Landfill, the Greenway Trail System, Biosolids, and the Recovered Materials Processing Facility (recycling center). This is an in-depth tour and will be tailored to the group and their interests. Please be prepared to walk approximately the length of three football fields. We recommend wearing a long-sleeved shirt and long pants.

All Grades:

The tour may involve elevator rides and walking flights of stairs to access certain areas of the facility. It is required that participants wear comfortable closed-toed walking shoes. We encourage participants to bring a reusable water bottle.

If you require any special accommodations, please let us know at the time of application. For more information, visit swa.org/fieldtrip. As consideration for being allowed to participate in the educational programs and activities offered at, by or through the Solid Waste Authority of Palm Beach County (Authority), including programs and activities that may involve access to areas not normally open to the public, I, _ (natural or legal guardian) agree to release, waive, discharge, and covenant not to sue the Authority along with its officers, directors, board members, supervisors, agents, servants or employees (collectively referred to herein as "releasee") from any and all liabilities, claims, demands, or causes of action that may arise from or be related to any loss, damage, illness or injury, including death, that may be sustained by myself or my personal property while I am on any premises, or in any vehicle owned or controlled by the Authority, or otherwise participating in programs or activities offered by or through the Authority, including but not limited to any loss, damage, illness or injury caused by inherent risks or by the negligent act or omission of the releasee. I am fully aware of the risks connected with participating in the programs and activities on the premises, and in vehicles owned or controlled by the Authority including, but in no way limited to, risks associated with entering and exiting the Authority bus, climbing stairs, riding on the Authority bus through, and exposure to, traffic that may include garbage trucks, tractor trailers, other large equipment, and potential encounters with wildlife such as alligators and venomous snakes, bites from wildlife, stings from insects and plants, scratches from plants and the natural surroundings. I voluntarily, on my own behalf, assume full responsibility

JERFSA STUDENT/PARENT CONTACT SHEET

The Academy office uses this information to communicate with students and families. This form is kept on file in the Academy office.

With your permission, we will share certain items of this information with the Partnership for Environmental Education to help facilitate their outreach and fundraising efforts.

If you do not want your information to be shared please indicate by checking this box.

Please print clearly.



Share Student's Name I prefer to be called: Student's cell # Home Phone# Mailing Address Student's email Father's Name Father's cell# Father's Address Father's Workplace Father's work # Father's email Mother's Name Mother's cell# Mother's Address Mother's Workplace Mother's work # Mother's email

I give my permission to share the above information with the Partnership for Environmental Education.

D	C'
Parent	Signature



- Community Service hours count only if you have provided service for a NON-PROFIT organization or agency. Work for your parents, friends, or neighbors does not count.
- 2. You may count only 8 hours in a single day. Only 4 hours for fostering animals. No donations for service hours.
- 3. All hours must be signed by a supervisor. If your supervisor is your parent, have another supervisor sign your sheet. **PARENT SIGNATURES DO NOT COUNT!**
- 4. Please turn in your hours as you complete them each month.
- 5. Hours for a given year must be turned in **before spring break** to count for this year. Hours served during April, May, or during the summer will be reported on next year's total.
- 6. If you report 100 or more hours during a single calendar year, you will be eligible to receive a certificate from JHS, with special recognition for earners of 200+ or 300+ hours.
- 7. **REMEMBER**: you must earn 200 hours of community service by the end of your Senior year in order to qualify for the JERFSA Certificate and Medal.
- 8. Please turn in all community service hours to the Academy Office. We enter your hours for both JERFSA and JHS, make copies for us, and then send the originals to Guidance to be filed. DO NOT TURN THEM IN TO GUIDANCE OR THE FRONT OFFICE!!!

Volunteers in Action

Once you have accepted a volunteer position that is right for you, you join hundreds of other young people who volunteer their time and talents in our community. As a volunteer, you have certain rights and responsibilities. Volunteering is a rewarding experience when both the agency and the volunteer have mutual respect and a desire to cooperate.

Volunteer responsibilities:

- To report on time at the appointed place.
- To call the supervisor if I am going to be late or absent.
- To carry out any given assignment to the best of my ability.
- To be willing to use all my talents and experience to do a good job.
- To take advantage and learn from my training.
- To learn about the organization I am working for.
- To accept guidance and direction.
- To take any problems or concerns I have to my supervisor.

VOLUNTEER RIGHTS

- To be treated as a co-worker.
- To be given a job that is suitable for my talents and experience.
- To be given training for my job.
- To know as much about the organization as possible.
- To have sound guidance and direction.
- To be listened to, especially if I have problems or concerns with my volunteer assignment

Please retain this sheet for future reference.



Name	Month & Year
Grade	Student Number

Date	Time in	Time out	Hours	Service Performed	Service Agency	Authorized Signature
				У.		

Total Hours	Student Signature	
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- PLEASE SUBMIT COMPLETED FORMS DIRECTLY TO THE JERFSA OFFICE ONLY!!!
- More than one month may be reported on this form.
- You can get more forms in the JERFSA hallway OR on jerfsa.com
- You won't get credit for more than 8 hours in a given day. Each hour counts as ONE hour.
- Only 4 hours per day are allowed for fostering animals.
- Donated items do NOT count as community service hours.
- The authorized signature cannot be your parent. Find a supervisor other than your parent.
- Only unpaid hours for a NON-PROFIT agency will count. You may not report volunteer service completed for a neighbor, relative, or friend.
- You may not claim volunteer hours served during the school day; only after-school or weekends...
- If you are going for a JHS volunteer award for the year, you must get your hours turned in by spring break. Hours earned after spring break will count for next year.

Don't forget your student number and signature!