

MLK BREAK S.T.E.M. TRIP



Disneyland®



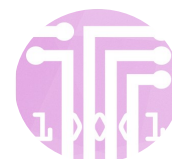
VISIT 5
COLLEGE CAMPUSES



DISNEYLAND
PHYSICS WORKSHOP



ENDLESS FUN!



JANUARY 15TH - 17TH

APPLICATION DUE NOVEMBER 12TH

EDUCATIONAL TALENT SEARCH S.T.E.M. TRIP JANUARY 15TH -17TH

We will be visiting 5 college campuses, Disneyland California Adventure, and exploring the Science Technology Engineering and Mathematics field

PERMISSION SLIP CHECKLIST

- ☐ ETS Permission Slip (White Form)
- ☐ ETS COVID-19 Liability Waiver (Yellow Form)
- ☐ YCCD Field Trip Excursion Waiver & Medical Authorization-Minor (Blue Form)
- ☐ YCCD Voluntary Activities Waiver Agreement (Green Form)
- ☐ School Permission Slip (If Applicable)

FIELD TRIP CHECKLIST

- ☐ **Mandatory ETS Field Trip Guidelines Orientation (Zoom)**
Thursday, November 18, 2021, 6 PM to 7 PM
- ☐ **Mandatory ETS Field Trip Readiness Orientation (Zoom)**
Thursday, January 6, 2022, 6 PM to 7 PM
- ☐ **COVID-19 Negative Test** (Administered between January 11, 2022 – 13, 2022)
- ☐ **Copy of COVID-19 Vaccine OR Copy Medical/Religious Exemption**

FIELD TRIP PREPARATION AND INFORMATION



If you are interested in attending, please return the permission slip to the ETS office or your school counselor by **Friday, November 12, 2021**

NO EXCEPTIONS! SPOTS ARE LIMITED, SO APPLY EARLY!



Your parent/guardian will need to help you arrange transportation to and from the pick-up and drop-off locations:

- **Woodland Community College (WCC)**; 2300 E. Gibson Street, Woodland CA 95776
- **Colusa County Campus (CCC)**; 99 Ella Street, Williams CA 95987



An email will be sent to you to inform you whether you have been selected to attend the college visit. Due to limited space, unfortunately, we are not able to accept all students that submit permission slips.

PLEASE REVIEW THE PERMISSION SLIP PACKET FOR IMPORTANT COVID-19 INFORMATION AND POLICIES

Please discuss the college visit with your parent/guardian and return the enclosed permission slip by:

FRIDAY, NOVEMBER 12, 2021

Questions? Please call the TRIO Office at
(530) 668-2285

Woodland Community College
2300 E. Gibson Road
Woodland, CA 95776
Room 850
(530) 661-2285



Colusa County Campus
99 Ella Street
Williams, CA 95987
CCC 121
(530) 668-2512



EDUCATIONAL TALENT SEARCH

PERMISSION FORM / EMERGENCY CONTACT INFORMATION



Name of Activity: MLK Break STEM Campus Tours
Destination(s): 5 College Campuses & Youth Education Series at Disneyland California Adventure
Date(s): Saturday, January 15, 2022 – Monday, January 17, 2022
Method of Travel: Charter Bus & Southwest Airlines
Logging: Desert Palms Hotel & Suites

STUDENT INFORMATION

First Name: _____ Last Name: _____
Cell Phone Number: _____ Email: _____
School of Attendance: _____ Gender: _____
Grade Level: _____ Total GPA: _____ T-Shirt Size (Adult): _____

MEDICAL INFORMATION

Do you have any Allergies or Health Issues the staff should be aware of?
(e.g., bee stings, peanuts, food, medication, etc.)

Does student have any dietary restrictions?
(e.g., vegetarian, vegan, etc.)

If the student has a special diet please anticipate providing enough food for all meals
The student must provide and self-administer any medication they may be taking.

Have you received a COVID-19 Vaccine? ☐ YES ☐ NO Date Administered: _____

Please provide/attach a copy with proof of vaccination.

If no, do you plan to get the COVID-19 Vaccine? ☐ YES ☐ NO

Please provide/attach a copy with proof of scheduled date.

If not, do you have a medical or religious exemption?

Please provide/attach proof

PARENT/GUARDIAN INFORMATION

First Name: _____ Last Name: _____
Cell Phone Number: _____ Email: _____



EDUCATIONAL TALENT SEARCH

COVID-19 INFORMATION & BEHAVIOR CONTRACT



COVID-19 INFORMATION

1. Effective December 1, 2021, all Yuba Community College District (YCCD) employees, students, and volunteers must be fully vaccinated against COVID-19 or submit to weekly testing in order to be physically present on district property or participate in college or district activities that exceed 15 minutes.
 - a. Educational Talent Search (ETS) at Woodland Community College (WCC) is an entity of YCCD. Therefore, ETS will be **REQUIRING** all those who participate in our in-person events and campus tours to have at least **ONE** dose of the COVID-19 vaccine.
 - b. If a participant chooses not to be vaccinated, they may still participate in ETS in-person events and campus tours so long as they provide proof of a **NEGATIVE** COVID-19 test three days prior to the event or campus tour.
 - c. ETS **MAY** accept a medical or religious exception, provided the participant has proof of exemption and it is approved by YCCD. Proof of exception must be submitted at minimum 6-weeks prior to the event or campus tour.
2. Every student, and employee is required to wear a face covering indoors per YCCD District policy. The only exception is for a documented accommodation. Therefore, you must wear a mask for the entirety of the trip, except to sleep, eat, drink, and if safety protocols allow for the removal of masks.
3. Students who refuse to wear a facial covering are given a final chance to comply, made aware of the consequence for non-compliance, which includes removal and/or suspension from the program.
4. **Federal law requires each person (ages 2 and over) to wear a mask at all times in the airport and throughout a flight, including during boarding and deplaning. Refusing to wear a mask is a violation of federal law and may result in denial of boarding, removal from the aircraft, and/or penalties under federal law.**

TESTING INFORMATION	COVID-19 VACCINE INFORMATION
<p style="text-align: center;"><u>Yolo County</u></p> <p>Testing is available at the Portable next to the Juvenile Detention Center 2780 E. Gibson Road, Woodland, CA 95776 Open Tuesday, Wednesday, Saturday 7AM – 12PM ; 1PM – 3PM</p> <p style="text-align: center;"><u>Colusa County</u></p> <p>Colusa Health Clinic 151 E. Webster St Colusa CA 95932 530-458-4162</p>	<p style="text-align: center;"><u>Yolo County</u></p> <p>Salud Clinic is offering free vaccinations in West Sacramento, Hansen Family Health Center in Woodland, and Davis Community Clinic in Davis. (530) 754-IVAX (4829)</p> <p style="text-align: center;"><u>Colusa County</u></p> <p>To schedule an appointment please call the Vaccine Scheduling Hotline: (530) 458-0399 Monday- Friday 8:00am - 4:30pm</p>

Additional testing information:

<https://healthydavistogether.org/testing/>
<https://www.countyofcolusa.org/915/Testing-Sites>

Additional vaccine information:

<https://healthydavistogether.org/vaccines/>
<https://www.countyofcolusa.org/949/Vaccine>



EDUCATIONAL TALENT SEARCH

COVID-19 INFORMATION & BEHAVIOR CONTRACT



BEHAVIOR CONTRACT

Educational Talent Search (ETS) trips are not an automatic benefit of participating in the program; in fact, they are an earned privilege. Any time that ETS students are together, they are representatives of ETS, Woodland Community College, their families, schools, and themselves.

I understand and agree to the following rules of conduct, which are in force from the time I arrive at the pick-up location until the time I return to the drop off location:

- Due to limited spots and travel arrangements that need to be made, **I understand that I am NOT allowed to cancel once I accepted to attend.**
 - I understand that a no-show will automatically disqualify me from any future event or campus tour and possibly the program.
 - If a medical or family emergency is to happen, I will provide proof.
- **I will attend the MANDATORY field trip virtual orientation on Thursday, November 18, 2021**
- Zero tolerance for alcohol, tobacco, and drug policy will be strictly enforced!
- I will wear the appropriate clothing and comfortable walking shoes (be prepared for warm and cold weather).
- I will follow the schedule and be where I am supposed to be at the appointed times.
- I will not steal, borrow (without permission), deface, damage, or destroy public or private property.
- On guided tours, lectures, presentations, or wherever a person is speaking in an official capacity, I will:
 - Silence my cell phone and not call/text
 - Not bring any form of music or games
 - Be respectful, attentive and courteous.
- On overnight trips, I will not switch from my assigned hotel room, nor will I enter the room of anyone of the opposite sex, without a staff member being present.
- I will not do anything that will bring discredit to Educational Talent Search or my fellow participants.
- **COVID – Protocol**
 - **I will wear my mask at all time in public places (bus, airplane, etc).** If I have been asked more than twice to put my mask on by and ETS staff, **I will be dismissed from the trip immediately and my parent/guardian will have to make transportation arrangements (paid by parent/guardian) to return home within an hour of dismissal of the trip.**

If any part of this contract is broken, my parent/guardian will be called to come pick me up immediately, regardless of our location, and I will be dismissed from the program.

Student Name (*printed*)

Student *Signature*

Date

Parent/Guardian Name (*printed*)

Parent/Guardian *Signature*

Date



YUBA COMMUNITY COLLEGE DISTRICT



Woodland Community College Educational Talent Search

COVID-19 PANDEMIC PARTICIPANT CONSENT FORM

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, and the disease caused by it, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Woodland Community College ETS Program has put in place preventative measures to reduce the spread of COVID-19; however, WCC ETS cannot guarantee that your child(ren) will not become infected with COVID-19. Further, attending WCC ETS events could increase your risk and your child(ren)'s risk of contracting COVID-19.

I confirm that I am not presenting any of the following symptoms of COVID-19 listed here: Fever, Shortness of Breath, Loss of Sense of Taste or Smell, Dry Cough, Runny Nose, Sore Throat

Student Initial: _____ ***Parent/Guardian Initial:*** _____

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending this event and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at WCC ETS may result from the actions, omissions, or negligence of myself and others, including, but not limited to, WCC ETS employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the event ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless WCC ETS, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of WCC ETS, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any WCC ETS program.

Signature of Parent/Guardian _____

Print Name of Parent/Guardian _____

Print Name of ETS Participant _____ School _____

Signature of ETS Participant _____

Phone _____ Date _____

YUBA COMMUNITY COLLEGE DISTRICT

FIELD TRIP/EXCURSION WAIVER STATEMENT AND MEDICAL AUTHORIZATION--MINOR

_____ has my permission to participate in the voluntary activity specified below,
Name (Print) and, as such, is not required by the District.

Field Trip/Excursion (Including Destination): _____

Departure Date & Time: _____ Return Date & Time: _____

Pursuant to the California Code of Regulations, Subchapter 5, Section 55220, I understand that I hold the Yuba Community College District, its officers, agents and employees harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity.

In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services. It is understood that the resulting expenses will be the responsibility of the parent or guardian.

Medical Insurance Carrier	Policy No.	Address
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A special note to Parent/Guardian: (1) All medications must be registered on his form; (2) All drugs, excepting those which must be kept on the student's person for emergency use, must be kept and distributed by the staff; (3) [_____] Check here if there are no special problems that the staff should be aware of and no medication is required on the trip; (4) If any medication is to be taken by student, list them below.

(Name of drug and reason) _____

If your child has a special medical condition, please attach a description of the problem to this sheet.

I fully understand that participants must abide by the Student Code of Conduct or Community Education Guidelines, whichever applies. Any violation of the rules and regulations specified in these documents may result in that individual being sent home at the expense of his/her parent/guardian.

I understand and acknowledge that if the District is not providing the transportation that it is my responsibility to arrange for my child's transportation to and from the activity.

If the District is not providing transportation I further understand:

- The driver of the vehicle in which the student is riding, either as driver or passenger, is not driving on behalf of or as an agent of the college, and the college has not verified the driving record of the driver, the liability insurance of the vehicle, or the condition of the vehicle.
- The District is in no way responsible, nor does the District assume liability, for any injury or loss that may result from the student's transportation.

Parent Name (Print)	Phone
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Parent Signature	Date
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Student Signature	Date
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12/17/2007



YUBA COMMUNITY COLLEGE DISTRICT

2088 North Beale Road, Marysville, CA 95901

Woodland, Yuba, Clearlake, Colusa & Sutter County, Beale AFB

Voluntary Activities Waiver of Liability, Assumption of Risk & Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in

Event name: _____

Date: _____

hereinafter called "The Activity", I, for myself, my heirs, personal representative or assigns, **do hereby release, waive, discharge, and covenant not to sue** the Yuba Community College District, its officers, employees, and agents from liability **from any and all claims including the negligence of the Yuba Community College District, its officers, employees and agents**, resulting in personal injury, accidents, or illnesses (including death) and property loss arising from, but not limited to, participation in the Activity.

Assumption of Risks: Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD the Yuba Community College District HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Photographic Release: I do hereby grant and convey unto the Yuba Community College District all right, title and interest in any and all photographic images and video or audio recordings made by the Yuba Community College District during my participation in The Activity, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs of recordings.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Signature of Participant

Print Name of Participant

Date

Age (if Minor)

Signature of Parent/Guardian of Participant if Minor

Print Name of Parent/Guardian of Participant if Minor

Date