

San Diego Jewish Academy

October 14-19, 2018

CURIOSITY

RESPONSIBILITY

COOPERATION

Yosemite



Dear Rising 6th Grade Parents,

We are excited to announce an exciting experiential education opportunity for our 6th grade students! At the beginning of next school year, we will be embarking on an exciting educational and adventurous field trip. The 6th students will be engaging in a program of dynamic activities that focus on not only on nature and environmental study, but will also be exploring curiosity, practicing communication and executive functioning, engaging in exploration and FUN! It is an action packed few days, filled with exciting activities that will lead to stronger group connections/cohesion, and self-discovery/growth. The program will take place October 14-19, and will be lead under the guidance of NatureBridge. NatureBridge environmental science programs in Yosemite National Park offer students the opportunity to learn hands-on science in one of the world's most stunning geologic wonders. Students hike through the dramatic landscapes of Yosemite, explore caves and natural wonders, wander across open meadows in reflective silence, and challenge themselves to reach the tops of waterfalls. Students are also empowered to see how their actions impact their community and the world around them through environmental service learning projects.

Important information

Departure: We will depart from the Upper School parking lot on Sunday, October 14th, promptly at 6:00am.

Return: We will return to SDJA on Friday, October 19th at approximately 4:00 pm. We will make sure to contact you on our way back for the exact arrival time.

Health Form and Meds: Please complete & return the SDJA waiver and health form. This is very important, as a child without a completed form will not be able to join us on the field trip. Medications should be packed in a ziplock bag with all of the student's information & dosage information inside or labeled on the back.
Asthmatic Students: Will not be able to participate in any activities without an inhaler. Please be sure they bring an inhaler. If they have two, bring both.

Packing List and Luggage: See attached for packing list.

Cell Phones and Electronics: Students may bring cell phones on the bus, but they will be collected when we arrive in Yosemite and will be given back when we get back on the bus to return home.

Behavior and safety: In the days prior to departure, all students will be reminded that this is an educational trip and that activities have been planned accordingly. They will also be reminded of behavior codes and consequences for failure to abide by the rules and expectations.

Emergency contact numbers: I will provide my cell phone number a few weeks before the trip. This is only to be used for emergencies.

Spending Money: All meals will be provided for the students. We will stop at a rest stop on the way to and from Yosemite, which has vending machines. There is also several gift shops throughout Yosemite where the students are able to purchase items and souvenirs.

Cost: The cost of the trip will be **\$1,011** This includes all meals, transportation, lodging, and staffing.

Payment: Payment accepted by the link provided through Diamond Mind, in check or money order to SDJA and submitted directly to the Upper School Office, or added to your existing FACTS account in ***good standing*** by emailing a request directly to: pbrannon@sdja.com. Full cost of Field Trip will be divided into a maximum of 3 payments. **This request must be made via email.**

Diamond Mind - <https://forms.diamondmindinc.com/sdja/fieldtrips?token=394109628>

Financial Aid: Eligibility for field trip financial aid is based on demonstrated financial need. Assessment of financial need is determined in accordance with how SDJA tuition assistance (TA) awards are determined. If your family did not apply for and receive TA for the 2018-19 school year, it is not expected that financial need criteria would be met for purposes of this trip. In order to apply for financial assistance for this trip please e-mail tuitionassistance@sdja.com by **August 15th, 2018**.

Paperwork Checklist

Please have the following paperwork and payment turned in to the Upper School Office by **September 1, 2018**.

We will provide attachments for everything below in a separate email.

- _____ 1) San Diego Jewish Academy Yosemite Information Packet (Read through)
- _____ 2) SDJA Liability Waiver
- _____ 2) SDJA Medical Form
- _____ 3) Yosemite Release Form (In a separate attachment)
- _____ 4) Payment (See Above)

Sample Day

6:30–7:15 a.m. Wake up

Students rise each morning and walk out of their cabins into one of the most stunning natural environments on the continent. They will use this time to shower, dress, and prepare for their day.

7:15–8:00 a.m. Breakfast

Meals are served either buffet-style or family style. *They will provide vegetarian options for our students.*

8:30-9 :00 a.m. Morning meeting

Students and teachers meet their NatureBridge educator in the cabin area prepared for the day.

8:30/9 a.m.–4 p.m. Instructional day

During the instructional day, your school splits into trail groups that average 12 students per group plus one or two teachers and chaperones. The NatureBridge science educator assigned to your trail group will work with the same group every day. Lunch is typically eaten out on the trail. Each day's learning adventures are customized to meet the academic and social goals your school has set. Some examples of popular instructional days:

- Hiking in Yosemite Valley while learning about the geological processes that formed the Sierra Nevada mountain range and Yosemite Valley.
- Completing team-building challenges and exploring lessons on leadership while hiking to the top of one of Yosemite Valley's waterfalls.

4–6 p.m. Recreation time

Students can use this time to shower and change, work on journals, or play outside.

5–6 p.m. Dinner

7:00–8:00 p.m. Evening program

Evening programs complement the material being presented during your day. These programs are engaging, educational, & inspiring. Students may learn about the history of Yosemite, take a night hike, or see a presentation about black bears.

9–10 p.m. Off to bed

This is the time for students to use bathrooms, change clothes, and brush their teeth. Teachers and chaperones supervise students during this time. The NatureBridge field safety officer is available to assist chaperones with any issues that arise. Lights out is at 10 p.m.

PACKING LIST

Students must be able to wheel or carry their bags

- _____ HIKING BOOTS OR STURDY ATHLETIC SHOES (NO skate shoes or shoes with slick soles)
- _____ EXTRA TENNIS SHOES OR SNEAKERS for evening activities and use around camp
- _____ THREE PANTS rugged pairs (1-2 pairs of shorts if weather is warm), avoid cotton
- _____ FIVE SHIRTS that you don't mind getting dirty
- _____ TWO SWEATERS OR FLEECES lightweight wool or fleece layers are best; avoid cotton
- _____ ONE JACKET an insulated layer, such as a parka with hood is a good choice
- _____ 7 PAIRS OF SOCKS AND UNDERWEAR (wool or synthetic preferred, no cotton)
- _____ *THERMAL UNDERWEAR (BOTTOMS/"TIGHTS") very warm and lightweight
- _____ *WATERPROOF MITTENS - mittens are warmer than gloves
- _____ PAJAMAS
- _____ TOWEL
- _____ TOILETRIES shampoo, soap, toothbrush, toothpaste, sunscreen, lip balm
- _____ PERSONAL MEDICATION
- _____ SLEEPING BAG and PILLOW
- _____ SUNGLASSES
- _____ LIGHTWEIGHT HAT WITH BRIM
- _____ FLASHLIGHT with spare batteries
- _____ BANDANA (the students eat lunch on this every day)
- _____ REUSABLE WATER BOTTLE (the are strict with students hydrating)
- _____ PLASTIC BAGS trash sized to keep your things clean and dry in your backpack

**SAN DIEGO JEWISH ACADEMY
FIELD TRIP/TRANSPORTATION PERMISSION, WAIVER, RELEASE AND
INDEMNITY AGREEMENT**

The sixth grade class at San Diego Jewish Academy ("SDJA") is taking a Field Trip to **Yosemite Park** leaving SDJA on **October 14, 2018** and returning on **October 19, 2018** ("Field Trip"). Participation in this Field Trip is not required but is voluntary. If you chose to have your student participate, please carefully review the below permission, waiver, release and indemnity agreement ("Agreement") and, if agreeable, sign, date, and return this Agreement along with the other Field Trip documents.

In consideration of the student named below ("Student") being permitted to participate in the Field Trip, the undersigned, parent(s) or legal guardian(s) of Student ("Parents") hereby agree to the following terms and conditions:

1. Participation: Permission is granted for Student to participate in the Field Trip with the understanding that Participation in this Field Trip is not required but is voluntary.
2. Risks: I/We understand and acknowledge that certain risks are inherent in field trips, including this Field Trip, and that those risks include but are not limited to: (1) the dangers inherent in any type of transportation, including driving in private cars, buses, or any other type of private or public transportation; (2) the dangers of being in a place open to the public; (3) minor injuries such as scratches, bruises, and sprains; (4) major injuries such as eye injury or loss of sight, joint or back injuries, and concussions; (5) catastrophic injuries including paralysis and death. I/we assume liability and responsibility for any such risks associated with participation in the Field Trip, whether described in this Agreement, known or unknown, inherent or otherwise.
3. Specific Risks: I/We also understand and acknowledge that there are certain additional risks inherent in this particular Field Trip where Student will be out in nature in a forest and possibly close to bodies of water, including but not limited: (1) the dangers of being exposed to adverse weather conditions; (2) dangers arising from physical and mental exertion; (3) dangers of being exposed to and/or touching animals, reptiles, insects or other wildlife; (4) dangers of walking, running and/or hiking on rugged terrain; dangers of exposure to poisonous plants. I/we assume liability and responsibility for any such risks associated with participation in the Field Trip, whether described in this Agreement, known or unknown, inherent or otherwise.
4. Expectations: I/We understand and acknowledge that Student is expected to abide by all SDJA school rules during the entire course of the Field Trip. I/We agree to direct Student to cooperate with SDJA school rules, and the directions and instructions of the supervisory personnel in charge of the Field Trip. ;
5. Hold Harmless: I/We acknowledge that, as a condition of Student's participation in this Field Trip, I/we hold harmless and waive any and all claims against SDJA, its trustees, officers, directors, employees, agents, and volunteers, including, but not limited to, claims arising out of any ordinary negligence of any trustee, officer, director, employee, agent, student or volunteer of the School, or any loss or damage to personal property occurring during or by reason of the Student participating in this Field Trip.
6. Release from Third-Party Liability: I/We acknowledge that, also as a condition of Student's participation in the Field Trip, I/we release and hold harmless SDJA from any and all claims SDJA, its trustees, officers, directors, employees, agents, and volunteers, including, but not limited to, claims arising out of any ordinary negligence of any third party and understand that SDJA is not an agent of, and has no responsibility for, any third party including without limitation any sponsor or program that may provide any services, equipment, training or activities associated with the above mentioned Field Trip.

7. Indemnification: As a condition of the Student's participation in this Field Trip, I/We indemnify SDJA for all claims against SDJA from other individuals, entities, or other third parties, as a result of the Student's participation in the Field Trip and and/or conduct during the Field Trip, including but not limited to any injury, accident, illness, or death, or any loss or damage to personal property.

8. Medical Care: I/We consent to any of the staff, employees, agents and representatives of SDJA administering or consenting to the administration of such emergency medical care to the Student during the Field Trip, as such person deems appropriate in the circumstances, and hereby authorize medical treatment in case of emergency and to provide all relevant information requested in the emergency and medical information form on the following page.

9. Medical Insurance: I/We understand and acknowledge that SDJA does not carry or maintain health, medical, or disability insurance coverage for the Student and therefore agree to assume the responsibility for such insurance coverage on the Student for anything that occurs during the Field Trip.

10. Medical Conditions: I/We agree to provide to SDJA current information concerning any medical or physical conditions, that the SDJA should be aware of, that if they arise on the Field Trip, student may need immediate medical attention, such as but not limited to, physical or mental conditions, allergies, asthma, and medications, of the Student, and names and phone numbers for emergency contact.

11. Severability: If any provision of this Agreement is held invalid or unenforceable, the remainder of this agreement shall nevertheless remain in full force and effect. If any provision is held invalid or unenforceable with respect to particular circumstances, it shall nevertheless remain in full force and effect in all other circumstances.

12. Voluntary Agreement: I/We, the Student's parent(s)/legal guardian(s) acknowledge that I/We have read the "Permission, Waiver, Release and Indemnity Agreement" and are aware of the legal consequences of signing this binding document. My signature below indicates that I have read and freely signed this Agreement. I further certify that I am legally competent to sign this Agreement.

IMPORTANT – READ ENTIRE AGREEMENT BEFORE SIGNING

Name of Student (Print name) _____ Grade _____

Name of Parent/Legal Guardian (Print name) _____

Parent/Legal Guardian (Signature) _____ / _____

(Date) _____

Name of Parent/Legal Guardian (Print name) _____

Parent/Legal Guardian (Signature) _____ / _____

(Date) _____

EMERGENCY AND MEDICAL INFORMATION

The undersigned, parent(s)/legal guardian(s) of _____ Grade: _____ hereby agree to the following terms and conditions set forth below:

In the event of accident or emergency, when a parent/legal guardian is unavailable, a representative of the school is hereby authorized to make such arrangements as he/she considers necessary for the Student to receive medical/hospital care, including necessary transportation. Under such circumstances, the Student and the parent(s)/legal guardian(s) further authorize the physician named below to undertake such care and treatment of the Student as he/she considers necessary. In the event the physician is not available, such care and treatment is authorized to be performed by any licensed physician. The Student and the parent(s)/legal guardian(s) 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. **The undersigned parent(s)/legal guardian(s) understand(s) that the resulting expenses will be the responsibility of the parent(s) or legal guardian(s).**

Emergency contact: Name: _____ Tel. No. _____

Additional contact: Name: _____ Tel. No. _____

Name of Student's

Primary Physician: Name: _____ Tel. No. _____

Please note any important medical or allergy information that may need to be known to treat Student for any medical or mental illness or injury: _____

A special note to parent(s)/legal guardian(s): (1) All medications must be registered on this form; and (2) All medication, excepting those which must be kept on the Student's person for emergency use, must be kept and distributed by the staff. If any medication(s) are to be taken by student, list them below.

(Name of medications) _____ Dosing Instructions _____

My signature below represents that I have addressed all medical information necessary for Student to participate in the field trip and be treated for any accident, illness or disease.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____