# YOUTH TRIP



**Diocese of Palm Beach** 



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## I. Introduction

The following *Policy & Pastoral Guidelines Concerning Supervision for Trips & Other Functions* has been approved by the Diocese of Palm Beach and is intended for the Diocesan parishes, schools, and other entities in accord with the *Diocese of Palm Beach Code of Pastoral Conduct for Church Personnel* and other official documents of the Diocese listed in the Preamble of this Code.

These rules, regulations, requests, and requirements are to be followed by all participants, youth ministers, chaperones, and supervisory personnel especially when traveling overnight both inside and outside the Diocese.

Types of groups include, but are not limited to, Diocesan, School, and Parish retreats, sports tournaments, conventions and conferences, and recreational trips.

The Diocese of Palm Beach requires youth ministers, chaperones, and supervisory personnel, to be at least 21 years of age or older to supervise participants defined herein as students enrolled in any Diocesan secondary school, elementary school, or pre-kindergarten program of education, parish activities or religious education. Siblings, friends, etc. are not defined as participants and cannot attend these activities. All participants are subject to the supervision of youth ministers, chaperones and supervisory personnel.

### II. Authorization

Trips and other functions must be approved, both for planning and implementation, by the principal in the case of elementary and secondary schools, and by the pastor of the parish in the case of parishes. Diocesan guidelines for such trips and functions must be adhered to without exception. The authorized Diocese of Palm Beach Field Trip Consent and Release form provided by the Diocese is required for all participants.

Youth ministers, chaperones, and supervisory personnel must be provided by the entity at a minimum ratio of 8 participants to 1 adult and must be gender specific. All Youth ministers, chaperones, and supervisory personnel must have successfully cleared the background screening requirements of the Diocese of Palm Beach including the educational requirements of Virtus.

## III. Elementary Age (Pre-K through 8th grade) Program Field Trips

Elementary age (Pre-K through 8th grade) participants are limited to one day in duration field trips with no overnight stay. These trips must have an educational component purpose.

### IV. Liability and Medical Release and Request to Participate Form

The signed Diocesan *Field Trip Consent and Release* form, which is attached, is required for all participants.

### V. Transportation

Transportation regulations are as follows:

- 1. It is preferred that transportation be commercially provided by licensed and bonded carriers.
- 2. If the transportation vehicle, defined as a bus, is provided by a Diocesan entity, school or parish, then the driver must be in compliance with the Diocesan CDL license policy. Contact the Diocesan Human Resource Office for details of this policy.
- 3. If the transportation vehicle, other than a bus, is provided by a Diocesan entity, school or parish, the driver must submit to the principal and/or pastor a completed Driver Information Form, and be cleared by Arthur J. Gallagher & Co.



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- 4. If the transportation vehicle is provided by Youth ministers, chaperones, and supervisory personnel, that driver must submit to the principal and/or pastor a completed Driver Information Form, and be cleared by Arthur J. Gallagher & Co., as well as have proof of current and valid insurance personal auto liability insurance at the \$100,000/\$300,000 level. A copy of the "declarations page" of the policy must be provided annually to the bookkeeper of each entity and maintained on file.
- 5. When more than one vehicle is used to transport participants, all authorized drivers must have written directions and should be familiar with the area where they will be traveling.
- 6. On long trips, a relief driver must be available at least every four hours. All drivers should have adequate rest before and after travel.
- 7. There must be at least two adults in each vehicle carrying youth at all times one adult to drive and the other to supervise the participants. Both adults must have undergone background screening and have been cleared to drive pursuant to Diocesan guidelines.
- 8. Vehicles must not exceed the passenger load. All passengers must have a seat; seat belt laws are to be observed at all times.
- 9. No weapons are to be carried in any vehicle at any time.
- 10. The use of alcohol, illegal substances, and legally prescribed substances that cause impairment are all prohibited.
- 11. No smoking is allowed in the presence of participants or in any vehicle.
- 12. Fifteen and sixteen passenger vans are not allowed to be used as transportation.
- 13. Cell phones must not be used by the driver while vehicle is in motion.

### VI. Accommodations

## A. Outdoor Camping is prohibited

### B. Hotel Rooms

- 1. Care is to be taken when booking hotels for groups. A request must be made upon making reservations that, if possible, all of the rooms be on the same floor or location in the hotel. There is to be no co-ed sleeping arrangement.
- 2. Youth ministers, chaperones, and supervisory personnel are not to be housed in the same room with participant except for the participant's parent or guardian.
- 3. All rooms must be checked by the Youth ministers, chaperones, and supervisory personnel before assigning them to participants to avoid males and females having adjoining doors. Adjoining rooms should only be shared by participants of the same gender.
- 4. Youth ministers, chaperones, and supervisory personnel must have room keys at all times for participants' rooms and monitor rooms periodically.
- 5. Participants must always be informed and reminded of safety rules and security measures.
- 6. No participant is to be allowed to leave the hotel property or go swimming in the hotel's pool or use the whirlpool or the hotel's exercise room without adult supervision.
- 7. Participants must never be allowed unsupervised access to the hotel rooms of other participants, youth ministers, chaperones and supervisory personnel.



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# C. Other Lodging Requirements

- 1. Youth ministers, chaperones, and supervisory personnel are not to be housed in the same room with participant except for the participant's parent or guardian.
- 2. In large dorm situations, Youth ministers, chaperones, and supervisory personnel may be housed in the same room with participant provided that at least 2 Youth ministers, chaperones, and supervisory personnel are assigned to the dorm. There is to be no co-ed sleeping in this dorm arrangement.
- 3. In situations where males and females share a common large room such as a parish hall, a sufficient number of supervisory personnel is to be provided on a rotating schedule to ensure constant supervision. Sleeping areas are to be clearly segregated between males and females.
- 4. Youth ministers, chaperones, and supervisory personnel are not to use a community shower, nor be in any questionable state of undress in the presence of participants.
- 5. The monitoring of clothes changing or showering of participants is not to be supervised by a lone adult supervisor and never an adult of the opposite sex. More than one adult supervisor must be present during these times. All Youth ministers, chaperones, and supervisory personnel must understand that extreme caution must be exercised at these times so that no actions, words, stares, or touches have the potential for misinterpretation. Any disciplinary actions are to be carried out after the participant has had the time to be properly dressed and must take place outside of the changing and bathroom areas.
- 6. Conversations with participant must always be conducted only when all parties are properly dressed.

## VII. Other Requirements

- 1. Youth ministers, chaperones, and supervisory personnel are not allowed to have participants remain over-night at their homes, especially as Church-sponsored activities, without another supervisory person present.
- 2. Caution must be taken when viewing any movies that may contain any violence or sexuallyexplicit content. All movies are to be pre-screened and pre-approved by Youth ministers, chaperones, and supervisory personnel in order to assure that they are age-appropriate and comply with Florida Catholic Conference guidelines.
- 3. The administering of medicine to participants outside the doctor's office or a health institution is a parental responsibility and should not be delegated except under unusual circumstances. Parents should ask their physicians if it is possible to prescribe medication so that it can be administered to participant's at home. Only when absolutely necessary is the school or parish to accept responsibility for administering medications to participants, and then, under the following guidelines:

The school or parish will never administer/dispense medicines (including "over the counter" drugs) to participants without specific authorization by both a licensed physician and the parent.

The *Diocesan Authorization for Medication Form* must be completed and submitted by the parent. The name of the medication and dosage must be indicated on this form.

Medications to be dispensed by the school or parish must be labeled with the participant's name and the exact dosages.

4. Priority must be given to ensure that all participants fulfill their Sunday and Holy Day obligations.



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5. The Diocesan *Field Trip Consent and Release* form must be filled out each year for each event within or outside the Diocese. Youth ministers, chaperones, and supervisory personnel will keep the forms on file for four years. A copy of the forms must be given to the principal, and/or coordinator of the event.

## VIII. Youth ministers, chaperones, and supervisory personnel

- 1. Youth ministers, chaperones, and supervisory personnel are required to read, to be familiar with, and be in compliance with all Diocese of Palm Beach Safe Environment Policies listed in the Preamble of the Diocese of Palm Beach Code of Pastoral Conduct for Church Personnel.
- 2. A minimum of one youth minister, chaperone, and supervisory personnel per eight participants is required.
- 3. All youth ministers, chaperones, and supervisory personnel must abide by the following:
  - Possession and/or use of weapons is prohibited on Diocesan property, on trips or other functions, and/or while in the presence of youth.
  - The use of alcohol, illegal substances, and legally prescribed substances that cause impairment are all prohibited.
  - No smoking allowed in the presence of participants or in any vehicle.
- 4. The Pastor, Principal, or Supervisor must ensure that all Youth ministers, chaperones, and supervisory personnel are in compliance with all Diocesan policies.
- 5. Youth ministers, chaperones, and supervisory personnel shall not at any time purchase questionable or illegal items for participants (i.e.: cigarettes, alcohol, drugs, weapons, condoms, and sexually-suggestive materials) and shall confiscate these items when found. If illegal weapons or drugs are confiscated, a police report shall be made and the confiscated items shall be turned over to the police.
- 6. Youth ministers, chaperones, and supervisory personnel are to carry cellular phones on trips for use in case of emergencies.
- 7. Trip emergency cards must be provided for each participant with the names of Youth ministers, chaperones, and supervisory personnel, hotel or lodging name, address, and telephone numbers.
- 8. Individual emergency cards must be completed by each participant to document each participant's emergency contact information.

### IX. Notification

- 1. A detailed list of all participants, Youth ministers, chaperones, and supervisory personnel with telephone numbers and emergency contact persons must be left with the school, parish, or entity sponsoring the trip.
- The Pastor, Principal, Superintendent, agency Administrator, and/or Diocesan Director of Catechetical Leadership and Youth Ministry Formation and/or the Director of Catechetical Leadership & Youth Ministry are to be immediately notified of any major accident or incident during the trip. The person notified shall immediately notify the Diocesan Director of Insurance & Employee Services.
- 3. Any youth ministers, chaperones, and supervisory personnel coming into the Diocese of Palm Beach for any event must have documented proof that the diocese from which they are coming is in compliance with the *Charter for the Protection of Children and Young People Revised Edition* and must provide proof that they have successfully cleared the background screening requirements of their Diocese.



EVENT:			
DESTINATION:			
DATE(S):			
NAME OF PARTICIPANT:	CELL PHONE:		
PARENT/GUARDIAN:	PHONE NUMBER:		
PARENT/GUARDIAN ADDRESS:			
CITY:	STATE: ZIP:		

EMERGENCY CONTACT INFORMATION					
NAME:	PHONE NUMBER:				
ADDRESS:					
CITY:	STATE:	ZIP:			

# SPECIAL NEEDS INCLUDING FOOD ALLERGIES:

If your child will require medication on this trip, please complete the Diocesan Authorization for Medication form.

I hereby freely and voluntarily consent to participation in the field trip/activity described above. I agree to assume all financial responsibility for participation in the field trip/activity and hold \_\_\_\_\_\_ (entity name), Diocese of Palm Beach, Inc. and all of their corporate members, affiliated entities, employees, officers, directors, and agents ("Sponsor") harmless for all costs incident to my participation in this field trip/activity.

I, the undersigned, a participant in the field trip described above, do waive and release Sponsor from liability for any injury, accident, or damages caused by any vehicle, weather, sickness, or otherwise stemming from any act or omission of any individual. I also release Sponsor and agree to indemnify it with regard to any financial obligations incurred by my acts or omissions.

I understand that all travel involves some risk, and I hereby agree to assume and consent to such risk. I hereby waive and release Sponsor for any injuries, damages, or losses incurred in connection with actions, omission or conditions or developments, or any other actions, omissions or conditions within or outside Sponsor's control. By my participation in this program I voluntarily assume all risks involved in such travel, whether expected or unexpected. I hereby acknowledge that I have been warned of such risks, and that I have been advised to take appropriate action and to govern myself accordingly. I am also aware that certain insurance companies do offer insurance against some of the many perils noted and that I may opt to insure myself should I so choose.

I hereby grant Sponsor full authority to take whatever actions they may consider in their sole discretion to be warranted under the circumstances concerning my health and safety and I specifically and fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize Sponsor at its discretion, to place me at my own (or my parents' or my guardians') expense and without further consent, in a hospital that is readily available, to place me in the hands of a local physician for treatment, should the need arise at my expense.

I agree to comply fully with the rules of Sponsor and any travel company and I agree that Sponsor has the right to enforce its standards of conduct as determined and interpreted in its sole discretion, and that, should I fail to comply with them, Sponsor has the right to terminate my participation in the program. In the event of termination, I agree to be sent home

at my parent(s)/guardian(s) expense. I understand that this is an organized program and that group standards must be observed. I hereby waive and release Sponsor from any claim arising out of my failure to remain under such supervision. In addition, I acknowledge the right of Sponsor to terminate my participation at any time of failure to maintain standards or for any actions or conduct for which Sponsor deems incompatible with the interest, harmony, comfort, and welfare of other students. I specifically agree not to bring any weapons or illegal drugs with me on the field trip/activity.

I acknowledge that Sponsor is not responsible either for any injury or loss whatsoever suffered by me during periods on independent travel or during any absence from the program of Sponsor.

All references in this release to Sponsor shall also include all of its chaperones, group leaders, faculty members, administrators, advisors, and agents. All reference to the parent of the participant includes the legal guardian or other adult responsible for the participant.

I have read the terms and conditions set forth by Sponsor and I agree that this constitutes a part of any agreement with Sponsor. I understand and agree to all of Sponsor's terms as set forth in the descriptive information and in this Release. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of Participant:	
Print Name:	Date:

I certify that I am the parent or legal guardian of the above-signed participant, and that I have read the foregoing release and examined the information in the description. I hereby join in each and every part of this Field Trip Consent and Release (including such part as may subject me to personal financial responsibility) and hereby relinquish any claims that I may have against Sponsor as set forth above, both in my own behalf and in my capacity as legal representative (as applicable) of the participant, including without limitations any claims arising as a result of the participant's leaving the supervision of Sponsor. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of Parent/Guardian:

Print Name:

Date:

# PHOTOGRAPH AND/OR VIDEOTAPE CONSENT & RELEASE

I hereby grant to Sponsor the right to photograph and/or videotape me and further to use my name, face, likeness, voice, and appearance in connection with exhibitions, publicity, advertising, and promotional materials without any reservation, limitation, or consideration. This waiver specifically releases any common law causes of action or claims under Fla. Stat. 540.08 and expressly constitutes written consent for publication of my name, face, likeness, voice and appearance.

Signature of Participant:	
Print Name:	Date:

I certify that I am the parent or legal guardian of the above-signed participant, and that I have read the foregoing release and examined the information in the description. I hereby join in each and every part of this Photograph and/or Videotape Consent and Release (including such part as may subject me to personal financial responsibility) and hereby relinquish any claims that I may have against Sponsor as set forth above, both in my own behalf and in my capacity as legal representative (as applicable) of the participant, including without limitations any claims arising as a result of the participant's leaving the supervision of Sponsor. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of Parent/Guardian:	

Print Name:

Date:



## **Student Name:**

Date:

It is necessary that medication be given as follows:

Prescription Medication (Brand Name and name as it appears on container if different)	<b>Dosage</b> (Amount to be given)	Form of Medication	Prescription No.		
		Tablet      Capsule      Liquid			
		Pill Inhalant Other	:		
		Color (if applicable):			

**Dispensing Instructions** (how often / what time):

Prescription Medication (Brand Name and name as it appears on container if different)	<b>Dosage</b> (Amount to be given)	Form of Medication			Prescription No.	
		Tablet  Tablet  Pill	Capsule	<ul><li>Liquid</li><li>Other:</li></ul>		
Dispensing Instructions (ho	w often / what time) <sup>.</sup>		applicable):			

Prescription Medication (Brand Name and name as it appears on container if different)	<b>Dosage</b> (Amount to be given)	Form of Medication			Prescription No.
		Tablet	Capsule	🗖 Liquid	
		🗖 Pill	Inhalant	D Other:	
		Color (if	applicable):		
Dispensing Instructions (how often / what time):					

#### No injection will be given, except in an extreme emergency, such as allergy to bee sting or the like.

The parent knows of this request and is in full agreement that the medication(s) will be supplied as needed. Should the student manifest any of the following symptoms caused by the medication(s), please contact the parent or my office.

### Symptoms:

## **Known Allergies:**

Physician's Signature:

Parent's Signature:

Print Physician's Name:

Print Parent's Name:

Physician's Phone Number:

Parent Phone Number: