



**Southeast Alabama Education Outreach Center**  
Educational Talent Search  
105 Pariton Avenue, P. O. Box 884 Dothan, Alabama 36303  
Phone (334) 673-9996 Fax (334) 673-9475  
Website: www.saeoc.org



**Wednesday, July 10, 2019:**

**Wallace Community College Dothan & ESCC- Aviation College Ozark**

**Depart from SAEOC: 8:30 AM**

**Return to SAEOC: 2:30 PM**

**Registration Deadline is Wednesday, June 19, 2019, 4:00 PM at SAEOC**

**Deposit required: \$20.00\***

**Rising 7, 8, 9<sup>th</sup> grade ETS participants 2019-20 Dress: School Attire**

**Student's Name \_\_\_\_\_ Grade for 2019-20 \_\_\_\_\_**

Initials (Parent & Student)

\_\_\_\_\_ I understand that my child, named above, is going on a field trip with the Southeast Alabama Education Outreach Center staff on Wednesday, July 10, 2019 to Wallace Community College in Dothan & ESCC- Aviation College in Ozark.

\_\_\_\_\_ Furthermore, I understand that my child must be able to follow directions and be responsible at all times. This trip is considered a special event and all regular medications for children, including Ritalin, should be taken as prescribed that day before students arrive. For students taking prescription medication, ETS staff will not be responsible for administering dosages while they are in attendance on this trip.

\_\_\_\_\_ I understand that transportation will be provided by a Dothan City school bus and that all necessary safety measures will be followed. Students will be expected to stay seated on the bus, stay with the group, and follow all rules according to the Dothan City School Code of Conduct as well as directions by the SAEOC staff.

\_\_\_\_\_ I understand that my child must be dropped off in ample time to load on the bus and that the bus will leave promptly at 8:30 am. I also understand that I must be at SAEOC no later than 2:30pm to pick up my child.

\_\_\_\_\_ By signing this form, I give SAEOC full permission to use my child's likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

\_\_\_\_\_ In the event of emergency, I have provided the SAEOC staff with emergency medical information and emergency phone numbers. In the event of an emergency, I give permission for the SAEOC staff to see that my child gets emergency care. However, should such incident occur, I will not hold the SAEOC staff responsible for any expenses or obligations above those associated with treatment of said accident/injury.

For and in consideration of the services provided by SAEOC Talent Search and its agents, and to the full extent permitted by Law (federal and state), I hereby waive, release, discharge, for my self and my minor child, Talent Search, its agents, employees, staff, directors, and counselors of any and all liability associated with any negligence and other liability which may occur during the trip and activities more particularly described above which may proximately cause any personal, emotional, or bodily injury to my minor child or my self. This waiver of liability is made knowingly and intelligently after my full investigation of the nature of the activities that my child will be participating in, and with the extent to waive legal remedies which might otherwise be available to me.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Emergency Contact \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_

Alternate Contact \_\_\_\_\_ Alternate Contact Phone # \_\_\_\_\_

Student's cell phone number \_\_\_\_\_ Dr. Charlotte E. Williams, Director

**Text number for reminders: \_\_\_\_\_**

**SAEOC reserves the right to cancel the trip or modify travel arrangements based upon number of student participants. If you pay your deposit and SAEOC cancels the trip, your money will be refunded. Otherwise, the deposit is non-refundable if the student cancels or does not show up. The deposit will be given to the student the day of the trip to pay for their lunch.**

**\* Students who cannot pay a deposit should talk to Dr. Williams ASAP. We will work out the details.**

**For Office Use Only:**

Date Deposit Paid: \_\_\_\_\_ Date ALL Paperwork Received: \_\_\_\_\_ Staff Initials \_\_\_\_\_

Added to Roster: \_\_\_\_\_ Put on Waitlist: \_\_\_\_\_ / Attended / No Show