

## MEMORANDUM

From: Senior Marine Instructor, MCJROTC AKHS  
To: Principal, AKHS

Subj: TRAVEL DESCRIPTION

We are planning on taking a maximum of 30 cadets on an orientation visit to the Norfolk, Virginia area to visit several facilities from 13-16 December 2017. These facilities are Naval Station Norfolk, Amphibious Base Little Creek and Naval Air Station Oceana. Only those cadets in good standing with the unit may attend; at a minimum this requires that they have no suspensions, failing none of their classes, a "C" average in MCJROTC and that their teachers sign off for each of their classes to participate on this trip.

The group will depart Ardrey Kell High School by charter bus at approximately 2:00 pm on Wednesday 13 December 2017 and return on Saturday 16 December 2017. During the trip the cadets will participate in physical training activities, hands on training of a LCAC simulator, receiving briefs from Marine and Navy personnel on amphibious capabilities, static displays of this equipment, a Navy submarine tour with briefs of the ships capabilities during the tour, hands on training of a Navy damage control and ship handling simulator, briefs and tours of a Navy F-18 and a Marine V-22 squadron along with simulator time for the cadets for these aircraft along with static displays of the actual aircraft. The cadets will stay on Naval Station Norfolk during this trip at the Sea Cadet Barracks with males and females separated within designated areas of this barracks while having adult male and female chaperones supervising the cadet behavior.

Cadets will pay for meals in route, to and from Naval Station Norfolk, Virginia. While on the bases, meals will be provided to the cadets by the galleys and chow halls at the bases listed at no cost.

The trips purpose and highlights are to develop informed and responsible citizens, our cadet's leadership, build character, teach about the elements of national security, stress discipline, teach respect for authority and show possible career choices outside the classroom.

The Marine Corps is funding all of this trip with the exception of the cadet meals to and from the Norfolk area. Cadets will be required to bring \$20 minimum for the meals to cover this shortfall. Let me know if you require any additional details or clarification. We look forward to having a successful trip during this 2017-2018 school year.

  
G.S. Ratliff  
Maj USMC (Ret.)

**ARDREY KELL HIGH SCHOOL MCJROTC**  
**PLAN OF TRAVEL**  
**13-16 DEC 2017**

**WEDNESDAY**

1315-1400	Commercial Bus (Christian Tours)	Pickup at AKHS
1400-1800	Travel via bus to Naval Station Norfolk	
1800-1900	Dinner in route (Students Cost)	
1900-2100	Arrive Naval Station Norfolk	
2100-0500	Overnight at Naval Station Norfolk	Sea Cadet Barracks

**THURSDAY**

0500-0545	Reveille/Cleanup	Sea Cadet Barracks
0600-0645	Breakfast	Naval Station Norfolk Dining Facility
0645-0730	Travel to Amphibious Base Little Creek	
0800-1130	Amphibious briefs, equipment displays and LCAC simulator). Confidence Course	EWTGLANT facilities
1145-1230	Lunch	Amphibious Base Little Creek Dining Facility
1230-1300	Travel to Naval Air Station Oceana	
1300-1500	Squadron tour, briefs, simulator and static display	NAS Oceana, VF-91
1500-1530	Travel to Naval Station Norfolk	
1600-1730	Submarine tour and brief	Naval Station Norfolk
1800-1900	Dinner	Naval Station Norfolk Dining Facility
1900-2100	Team building – Leadership discussions	Naval Station Norfolk
2100-0500	Fire Watch/Sleep	Sea Cadet Barracks

**FRIDAY**

0530-0630	Reveille/Cleanup	Sea Cadet Barracks
0645-0730	Breakfast	Naval Station Norfolk Dining Facility
0800-1100	Damage Control Simulator	
1130-1230	Lunch	Naval Station Norfolk Dining Facility
1300-1500	Ship Handling Simulator	Naval Station Norfolk
1515-1700	Squadron tour, briefs, simulator and static display	VMM-764, Naval Station Norfolk
1730-1830	Dinner	Naval Station Norfolk Dining Facility
1900 -2100	Team building -Leadership discussions	Naval Station Norfolk
2100-0600	Fire Watch/Sleep	Sea Cadet Barracks

**SATURDAY**

0630-0800	Reveille/Cleanup	Sea Cadet Barracks
0815-0900	Breakfast	Naval Station Norfolk Dining Facility
0900-1300	Travel via charter bus to AK	
1300-1400	Lunch in route (Students Cost)	
1400-1600	Arrive Ardrey Kell	

## PARENTAL CONSENT AND RELEASE FORM FOR FIELD TRIPS

CHARLOTTE-MECKLENBURG SCHOOLS PARENTAL/GUARDIAN CONSENT FOR:

- Acknowledgement of Personal Liability
- My Child to Ride with Private Drivers

### BACKGROUND

My child, \_\_\_\_\_, has permission to participate in the field trip to ~~the~~ NAVAL STATION NORFOLK & AREA ("activity") on 12 / 13-16 / 17. I understand that this activity involves travel to and from ANDREY KELL HIGH SCH. I also understand that this activity (circle one) does ~~does not~~ involve staying overnight. I understand and acknowledge that the Charlotte-Mecklenburg Board of Education ("Board") is the legal entity that operates Charlotte-Mecklenburg Schools ("CMS" or "District").

### CONDUCT DURING ACTIVITY

I understand that my child's participation in the activity is a privilege, and not a right. I acknowledge that I have spoken with my child about my child's need to comply with the specific rules and requirements established for this activity; all District policies and procedures; rules of conduct set forth in the Student Code of Conduct; and, state and federal regulations and laws. I understand that all District rules and policies apply to my child and the other students during the course of the field trip.

### TRANSPORTATION PERMISSIONS AND WAIVER

I also understand that private drivers, which may include my child (pending my written permission below), a teacher, an administrator, or the parent of another student participating in the activity, may be used to transport students to and from the activity. The owner of the vehicle must carry bodily injury insurance. The District's insurance does not cover damages arising from, or related to, the operation of any private vehicle, failure to follow the directed driving route, or any personal negligence related to this activity. Any damages/harm resulting from a parent/guardian/or other designated driver (including student-drivers), arising from the operation of a motor vehicle in relation to the above listed activity, is hereby waived.

Please initial on the three spaces to the left of each statement below to acknowledge your acceptance of the following permissions.

\_\_\_\_\_ I give permission for my child to ride in a vehicle driven by a teacher, an administrator, sponsor, or parent of another student to the activity.

I also understand that I have the ability to refuse to sign this Form. In addition, that if I refuse to sign, my child will not be permitted to participate in the activity.

ACKNOWLEDGEMENT OF PERSONAL LIABILITY AND WAIVER

I also understand that this field trip may expose my child to some risks and I assume any such risk that may arise there from. I accept full responsibility for all medical expenses for any injuries that might occur to my child by reason of his/her participation.

**By signing this form, however, I hereby** release CMS, its Board, its Board members, administrators, directors, officers, teachers, employees, agents, assigns, and volunteers ("released parties") from and against any and all claims, demands, actions, complaints, suits or other forms of liability that any of them may sustain (a) arising out of my child's failure to comply with local, state, and federal laws and District policies, procedures, and the Code of Conduct; (b) arising out of any damage or injury caused by my child; or, (c) arising out of a parent/guardian/or other designated driver's operation of a motor vehicle in relation to this activity. I also agree to indemnify and hold harmless the released parties from the released claims, including any and all related costs, attorney fees, liabilities, settlements, and/or judgments.

SIGNATURE

I confirm that I have carefully read this CONSENT AND RELEASE and agree to its terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the child or I am a student 18 years or older.

I have signed this CONSENT AND RELEASE this \_\_\_\_ day of \_\_\_\_\_, 20, \_\_\_\_.

This consent and release has been read and is understood by me.

\_\_\_\_\_  
Student's signature (If 18 years or older)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student's Parent or Legal Guardian  
(If Student is less than 18 years)

\_\_\_\_\_  
Date

**ARDREY KELL HIGH SCHOOL  
SCHOOL ACTIVITY APPROVAL FORM PERMISSION FORM**

Student: \_\_\_\_\_ ID: \_\_\_\_\_

A class trip has been approved to NORFOLK, VIRGINIA  
(Destination)

On 13-16 DEC 2017  
(Date)

**Purpose/Description:** THE TRIP WILL TAKE US TO NAVAL STATION NORFOLK, AMPHIBIOUS BASE LITTLE CREEK, AND NAVAL AIR STATION OCEANNA TO INTERACT WITH MARINES, SAILORS, AND THE EQUIPMENT AND SIMULATORS THAT THESE SERVICE MEMBERS DEAL WITH ON A DAY-TO-DAY BASIS. THE EQUIPMENT AND SIMULATORS THAT THE STUDENTS WILL GET HANDS ON TRAINING AND EXPERIENCE WITH ARE AIRCRAFT SIMULATORS, BRIEFS BY PILOTS AT THEIR AIRCRAFT DURING A STATIC DISPLAY, WALK AND BRIEF ABOARD A NAVAL SUBMARINE, TIME ON THE SHIP BOARD HANDLING SIMULATOR, TIME IN THE DAMAGE CONTROL SIMULATOR, AND BRIEFS AND STATIC DISPLAYS OF MARINE AMPHIBIOUS MISSIONS AND THEIR EQUIPMENT. ALL MEALS AT THESE LOCATIONS WILL BE PROVIDED BY THE DINING FACILITIES AT THESE LOCATIONS.

**Students must attached grades from Power School**

**Teachers: (must be fill out by the teacher)**

All teachers whose class will be missed are required to indicate **YES – they can miss your class or NO - they are not doing well and need to be in class**, regarding the student's academic performance – grades cannot be a D or F.

Attendance cannot be more than 5 absences in your class. The student is responsible for making arrangements to make-up work. **You must include how many absences the student has in your class.**

	1st Block	2nd Block	3rd Block	4th Block
Please circle	A Day, B Day or Semester	A Day, B Day or Semester	A Day, B Day or Semester	A Day, B Day or Semester
Class				
Teacher				
Yes or No				
Teacher Signature				

I give permission for \_\_\_\_\_ [child's full name] to go on this non-required trip sponsored by CMS.

\_\_\_\_\_  
Parent/Guardian Date

**THE CHARLOTTE-MECKLENBURG BOARD OF EDUCATION ("CMS")**  
**Notice of CMS' Right to Cancel Trips**

CMS sponsors and approves certain non-required field trips, including some overnight and foreign travel. The purpose of CMS approval of such non-required field trips is to assure that any such trips are part of the curriculum and to authorize excused absences from school for both students and CMS staff. **CMS does not assume any financial responsibility for non-required field trips. Trip participants, not CMS, pay for non required trips.**

CMS administration reserves the right, in its sole discretion, to cancel or postpone all CMS-sponsored field trips and related travel with no advance notice. By way of example, and not limitation, CMS may cancel all field trips and travel in the event of an act of terrorism or war or the threat of an act of terrorism or war.

Travel agents and other providers of travel-related services typically require nonrefundable deposits that are retained by the service provider if a trip is cancelled. **CMS is not responsible for any such cancellation fees charged by service providers and will not reimburse trip participants for any monies paid to such service providers, even if CMS cancels the scheduled trip.**

CMS recommends that all trip participants review all travel-related contracts and make sure they understand their possible financial risks and obligations. Travel-related contracts for these non-required field trips typically should be signed by the PTAs, Booster Clubs or individual parents that pay for the trip. In appropriate circumstances, with approval of the Superintendent, CMS can be a party to the travel-related contracts; however, CMS will do so only if the contracts specifically state that any cancellation fees are the responsibility of the individual trip participants, not CMS, even if CMS administration cancels the trip.



## CHARLOTTE-MECKLENBURG SCHOOLS CLASS TRIP STUDENT PERMISSION FORM

Date:

Dear Parents:

A class trip has been approved to *NAVAL STATION NORFOLK  
AMPHIBIOUS BASE LITTLE CREEK  
NAVAL AIR STATION OCEANA*  
on *13-16 DECEMBER 2017*

The signature of a parent/guardian is required in order to allow your child to participate in this off-campus trip. Please sign the bottom portion of this form and return it to the teacher.

Sincerely,  
*GERALD S. RATLIFF  
MAY USMC (RET.)*

Mode of travel: ☐ School/Activity Bus ☐ Car(s) ☒ Other Charter Bus

Cost of trip: \$ *20* students and \$ \_\_\_\_\_ chaperones. *NO* ~~payment is due by~~ and  
~~the remaining half is due by~~ . ~~Total amount is due by~~ .

Time of departure from school: *2* <sup>*13 DEC*</sup> p.m. Time of return to school: *4* p.m. *16 DEC*

Meal Information: *\$20 IS FOR STUDENT MEAL TO AND FROM NORFOLK.  
THIS PROGRAM WILL FUND ALL MEALS FOR THE STUDENTS OTHERWISE.*

Information about the field trip: *THE TRIP WILL TAKE US TO NAVAL STATION NORFOLK, AMPHIBIOUS BASE LITTLE CREEK, AND NAVAL AIR STATION OCEANA TO INTERACT WITH MARINES, SAILORS, AND THE EQUIPMENT AND SIMULATORS THAT THESE SERVICE MEMBERS DEAL WITH ON A DAY-TO-DAY BASIS. THE EQUIPMENT AND SIMULATORS THAT THE STUDENTS WILL GET HANDS ON TRAINING AND EXPERIENCE WITH ARE AIRCRAFT SIMULATORS, BRIEFS BY PILOTS AT THEIR AIRCRAFT DURING A STATIC DISPLAY, WALK AND BRIEF 'ABOARD A NAVAL SUBMARINE' TIME ON THE SHIP BOARD HANDLING SIMULATOR, TIME IN THE DAMAGE CONTROL SIMULATOR, AND BRIEFS AND STATIC DISPLAYS OF MARINE AMPHIBIOUS MISSIONS AND EQUIPMENT.*

I have read the field trip description.

I give permission \_\_\_\_\_ I do not give permission \_\_\_\_\_

for \_\_\_\_\_ to go on this trip sponsored by the

*Student's full name*  
Charlotte-Mecklenburg schools.

Cash or check enclosed. Please make checks out to *NO CASH OR CHECK REQUIRED.*

\_\_\_\_\_  
Date

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

**Donation:** I would like to donate \$ \_\_\_\_\_ to help a student who is unable to pay the full cost.

**This is a legal document. Please read and understand this document before signing. If you have questions please consult an attorney**

### **PRIVACY ACT STATEMENT**

**Authority:** This information is collected pursuant to Title 5 United States Code, section 301.  
**Purpose:** The purpose this information is to form a legally binding release agreement.  
**Routine Uses:** The information will be used to evaluate and defend potential claims against individuals concerned and the United States Government. The information could ultimately be used in civil litigation and in the course of preparation for litigation.  
**Disclosure:** Supplying this information is voluntary; however, failure to provide the information could result in a denial of permission to participate in the events stated below.

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### **PREFACE**

Participation in the Naval Special Warfare Group TWO ((NSWG-2) Obstacle course training is not risk free. The same elements that contribute to the unique character of the NSWG-2 obstacle course such as physical exertion or the risk can cause loss or damage to equipment, and injury, illness or in extreme cases, permanent trauma or death to participants. You on notice and understand in advance of what to expect, and are informed of some of the possible risks. These injuries occur more often when the participants are using drugs or alcohol or not physically able to undertake the NSWG-2 obstacle course.

### **NSWG-2 OBSTACLE COURSE ACKNOWLEDGEMENT OF RISK**

Obstacle courses can be a hazardous activity. The obvious accidents that occur in participating in an obstacle course are falling. Whenever you fall, you may fall only a few feet or all the way to the ground. As you fall, you may hit objects on the particular obstacle or other obstacles/objects that are in your path. Falling to the ground may cause serious injury from any height. You will be climbing, sliding, jumping, crawling, swinging, and running on a variety of obstacles.

Equipment may be defective and/or fail. Each obstacle is periodically inspected for damage, however the extreme conditions of the environment in which the obstacle course is used, in conjunction with the damages caused by consistent use of the obstacle course may cause defects in the course and equipment. These defects may contribute to injuries.

You may incur cuts, bruises, strains/sprains, blisters, and fractures from the ropes, walls, nets and other obstacles.

The list of possible accidents stated above may inflict bodily injury, disease, strains, fractures, partial and/or total paralysis, other ailments that could cause serious disability, or death. It is also possible that some participants would suffer mental anguish or trauma from the experience or their injuries.

This list is not an exclusive or exhaustive list of possible injuries, trauma, or accidents that may occur while using the NSWG-2 obstacle course. Serious injuries, such as paralysis and death, are rare and you are not likely to encounter them. However, they have occurred, and you need to know about them and other possible injuries not mentioned above. These injuries occur more often when the participants are using drugs or alcohol or not physically able to undertake the NSWG-2 obstacle course.

### **INDIVIDUAL RELEASE OF LIABILITY, ASSUMPTION OF RISK AND HOLD HARMLESS AGREEMENT**

1. I, the undersigned, hereby certify that I am in good physical condition and am fully capable of participating in the Naval Special Warfare Group TWO obstacle course training event. I have read and fully understand the above paragraph concerning the possible risks associated with my participation in this activity. I understand and agree to assume full responsibility for any and all bodily injury and any and all expenses incurred as a result of my negligence, negligence of another participant in the NSWG-2 obstacle course, and/or negligence of the United States Government and or its officers and employees. I further understand and agree that NSWG-2 and its officers, agents and employees reserves the right, at any time, to refuse any person it judges to be incapable of meeting the rigors and requirements of participating in this training event.



2. I, the undersigned, acting in my own capacity and on behalf of myself, my heirs and estate, in consideration of receiving permission from Commander, Naval Special Warfare Group TWO, to utilize the NSWG-2 obstacle course., do hereby release the United States; all agencies and departments of the United States Government including, but not limited to, U.S. Department of Defense and all agencies and units within, including, but not limited to, the U.S. Army, U.S. Navy, U.S. Air Force, U.S. Marines, all state and local agencies and departments; Commander, Naval Special Warfare Group TWO, Naval Special Warfare Command, Commander, United States Special Operations Command and its officers, agents and employees; and the unit/agency executing the training of and from any liability, claims, court actions or causes of action for personal injury or property damage which I may suffer while participating in said event, during my transportation to and from the site, or while using NSWG-2 obstacle course. I also agree to hold harmless the same individuals and entities outlined above from any liability, claims, court actions or causes of action for any damage or injury I may cause to the person or property of other persons while participating in the said event.

3. By my signature below, I certify that (1) I do not have any medical condition that would prevent me from participating in the NSWG-2 obstacle course. (2) I have adequate health, disability and life insurance to cover any possible injury or loss that I may suffer during the obstacle course training. I further give my permission to be transported to any medical facility or hospital and authorize any instructor and/or medical personnel to render necessary medical care, in the unlikely event that I am injured.

4. I understand and agree that if any part of this Agreement shall be declared unenforceable or void by a court of competent jurisdiction, the remaining parts shall remain in full force and effect. I further understand and agree that a copy of this agreement shall be given the same legal sufficiency as the original.

I certify that I have read, fully understand and make this Agreement voluntarily, realizing the consequences of said Agreement this \_\_\_\_\_ day of \_\_\_\_\_, 2015.

_____	_____	_____	<u>Yes / No</u>
<b>Printed Name</b> (incl rank or title)	<b>Phone Number</b>	<b>Unit/Organization</b>	<b>U.S. Citizen</b>

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Emergency Contact Name and Phone Number**

_____	_____	_____
<b>Participant Signature</b>	<b>Date</b>	<b>Age</b>

_____	_____
<b>Parent/Legal Guardian Signature (if under 18 years of age)</b>	<b>Date</b>

<b>Naval Special Warfare Group TWO Staff Use Only</b>								
<table border="0"><tr><td>_____</td><td>_____</td></tr><tr><td><b>Date of Event</b></td><td><b>Unit in Training</b></td></tr><tr><td colspan="2">_____</td></tr><tr><td colspan="2"><b>CNSWG Staff Signature (Witness)<sup>i</sup></b></td></tr></table>	_____	_____	<b>Date of Event</b>	<b>Unit in Training</b>	_____		<b>CNSWG Staff Signature (Witness)<sup>i</sup></b>	
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