

Oroville Union High School District
Request for Board Approval to Participate in a "High Risk" Activity

Activity: _____

Date(s): _____ Hours: _____

Location(s): _____

Individuals Responsible for Supervision: _____

Cell Phone # for the Above Individuals: _____

Additional Chaperones: _____

List of Students Attending Activity (attach list if additional space is needed): _____

Liability and property insurance can be purchased for special events through companies like insurevents.com.
Has special event insurance been purchased? Yes No If yes, please attach a copy of the policy.

Provide details of any measures taken to reduce the risk of incurring a loss: _____

High Risk Categories

The following activity/activities are considered "High Risk" Activities by the Butte Schools Self- Funded Programs (Policy 5.9). For any claims arising out of the specified activity/activities, the District will incur a \$5,000 deductible.

- | | | |
|---|--|--|
| <input type="checkbox"/> Snow/ski trip | <input type="checkbox"/> Scuba diving trips | <input type="checkbox"/> Any water activity without the presence of a lifeguard at all times* |
| <input type="checkbox"/> Bicycle activities/trips | <input type="checkbox"/> Out-of-country trips | <input type="checkbox"/> Indoor/outdoor floor hockey |
| <input type="checkbox"/> Kickboxing, martial arts | <input type="checkbox"/> Bonfires | <input type="checkbox"/> Bounce houses/inflatable structures |
| <input type="checkbox"/> Overnight trips (chaperones not fingerprinted) | <input type="checkbox"/> Skateboard/rollerblade/motorized cycles or similar item | <input type="checkbox"/> Outdoor rock climbing, spelunking or rappelling (no contract for Ropes or similar course) |
| <input type="checkbox"/> Indoor skydiving | | |
| <input type="checkbox"/> Use of a private residence | | |

***You must complete the second page.**

Requestor's signature: _____

Date: _____

Principal's signature: _____

Date: _____

Asst. Superintendent's/CBO signature: _____

Date: _____

Date of Board approval: _____

Forms are due to the Superintendent's office no later than the first working day of the month in which the activity occurs.

Water Activity Requirements

1. A certified lifeguard must be present for any swimming activity in open bodies of water (lakes, Forebay, oceans, rivers, etc.) and private pools.
2. For swimming activities in any private pool, we require proof of insurance from the homeowner. A Certificate of Insurance listing the district as an additional insured must be attached to this form.

Please list specific details of your water activity: _____

Name of certified life guard (if applicable): _____