



FIELD TRIP/OUTING PLANNER



Class/Organization _____ Number of Attendees _____
(3rd Grade, Pathfinders, English Dept., etc.)

Outing/Destination _____
(Museum, Sea World, Zoo, Yosemite National Park, London, etc.)

Planned Activities _____

(List all planned activities: Museum Study, Concert, Camping, Day Hike, Rock Climbing, Bicycling, etc.)

| TRANSPORTATION | √ ONE OR MORE | | | NOTES |
|--|----------------------|-----------|------------|--------------|
| Public Transportation | | | | |
| Rental Vehicle | | | | |
| School/Church Vehicle | | | | |
| Private (Personal) Auto (Not recommended) | | | | |
| NOTE: A "NO" response may indicate a need for additional safety/risk management measures. | | | | |
| | YES | NO | N/A | |
| Qualified Drivers (Good driving record/current MVR, Age 21+, valid and current license per type of vehicle, etc. See NAD Working Policy – S60 31) | | | | |
| Vehicle(s) -- Safe Well-Maintained Condition | | | | |
| Tires -- Proper Size and Rating | | | | |
| Meet Safe, Legal Tread Wear Limits | | | | |
| Vehicle Properly Insured | | | | |
| • Special Vehicle Insurance Coverage (Mexico) | | | | |
| Fire Extinguisher | | | | |
| Emergency Road Kit (Reflectors, etc.) | | | | |
| First Aid Kit | | | | |
| Seat Belts Required | | | | |
| Seating and Load Capacity Adhered To | | | | |
| Transportation in the Back of Open Vehicles Prohibited (Pickup Trucks, Flat Beds, etc.) | | | | |
| Follow-up Vehicles Provided (Bike and Walkathons, etc.) | | | | |
| ADMINISTRATIVE | | | | |
| Permission Slips | | | | |
| Medical Release Forms (Available for all children under 18) | | | | |
| Volunteer Forms Signed/Filed (Child Abuse) | | | | |
| Activity/Site Approval by Proper Authorities (State, County, City, Fire Marshal, Park Service, etc.) | | | | |
| Requirements by Proper Authorities Met | | | | |
| Certificates of Insurance Obtained as Needed | | | | |
| Accident Medical Insurance | | | | |
| • Miscellaneous Accident | | | | |
| • Volunteer Labor Construction (as needed) | | | | |
| • Short Term Travel (If outside U.S. and Canada) | | | | |
| Traveler's Advisory Checked | | | | |

| | YES | NO | N/A | NOTES |
|--|-----|----|-----|------------------------------|
| <i>SUPERVISION</i> | | | | |
| Adequate Number of Supervisors* (Minimum of two required – Additional supervision based on risk) | | | | Number Required _____ |
| Supervision Qualified for Activity | | | | |
| First Aid Trained Staff | | | | |
| Current CPR and Lifeguard Certification | | | | |
| <i>EMERGENCY PLANNING</i> | | | | |
| (NOTE: In many regions, <i>weather</i> conditions can change dramatically in a short period of time – clear and warm to blizzard, cool to extreme heat. Check weather advisories and always plan for any potential weather extremes for the area visited.) | | | | |
| Emergency/Disaster Plan Prepared | | | | |
| Cellular Phone | | | | |
| Portable Two-way Radios | | | | |
| Citizen Band and/or Marine Radio | | | | |
| AM/FM or Weather Band Radio | | | | |
| Additional Clothing Requirements | | | | |
| Shelter Requirements | | | | |
| Emergency Water | | | | |
| Emergency Food | | | | |
| Wool or Space Blankets | | | | |
| Clothing and Equipment Lists Distributed | | | | |
| <i>ACTIVITY SAFETY</i> | | | | |
| Safety Equipment Available for All Participants (Life Jackets, Safety Harnesses, Helmets, Knee and Elbow Pads, etc.) | | | | |
| Safety Equipment Required for All Participants | | | | |
| Safety Equipment Checked Prior to Trip | | | | |
| Safety Equipment Inspected Before Each Use | | | | |
| All Work Projects Adhere to OSHA and International Standards (Strongest Shall Be Used) | | | | |
| All Child Labor Laws Observed | | | | |
| <i>ADDITIONAL NOTES AND COMMENTS:</i> | | | | |
| | | | | |

* See supervision attachment pertaining to examples of supervision requirements for various activities.

Requested by _____ Date _____

Title _____

Approved by _____ Date _____

Title _____

NOTE: Safety elements included in this form are suggested as minimal considerations. Other additional measures will generally be required for every activity. The maintenance of safe premises, operations, activities and equipment are the legal responsibility of the insured. Adventist Risk Management assumes no responsibility for the management or control of the insured's premises, operations and activities or for the safety elements or procedures used by the insured. Liability on the part of Adventist Risk Management for loss is hereby disclaimed.