

## TRIP: ALCATRAZ DATE: May 8, 2010 / COST: \$15.00 REGISTRATION SHEET SPONSORED BY: LMC Student Life Office

**REGISTRATION DIRECTIONS:** *Fill out this form completely and turn it in to the Student Life Office* (x3266). *You must also submit a completed Medical Release Form and Payment in order for your registration to be complete.* 

Spots are open on a first come, first served basis. DEADLINE to register is Thursday, April 29 at 4PM. All additional information regarding this trip will be sent via email to the address listed below.

Name:	Student ID #:
Address:	
Home Phone:	Cell Phone:
E-mail:	

I understand that I am attending this fieldtrip as a representative of my Los Medanos College and that my expenses are paid in part by the college. I understand that I am expected to conduct myself in a responsible manner and agree to the following:

- I am currently enrolled at Los Medanos College.
- No unauthorized personal vehicles are permitted to be driven without the approval of the staff.
- I am aware that the California State Education Code and the policies of the Contra Costa Community College District prohibit possession or use of alcoholic beverages or any controlled substance during the college function, regardless of attendee's age. (Prescriptions should be registered when turning in your application, for your own protection).
- I understand that no inappropriate behavior will be permitted, nor any behavior that would endanger the undersigned or others. I also understand that I am responsible for any damages I cause to any facility while attending this trip.
- I agree I will not invite any outside visitors to participate in program activities without having obtained prior approval from the staff leader in charge.
- I understand that this activity is an official college field trip and that I am required to attend all possible sessions.
- I understand that any infraction may result in possible disciplinary action and may result in immediate dismissal from the activities and that I will then become responsible for making other arrangements for my return to the college.
- All participants must stay within the designated areas announced.
- Any exceptions must be approved by the staff leader one (1) week prior to the event date.
- I understand that if any of the aforementioned conditions are broken, I will be removed from the program activities and placed under observation by a member of the college staff and disciplinary action according to Los Medanos College Student Discipline and Suspension guidelines will be enforced.

## By signing this form, I understand that I must abide by this Code of Conduct Attendance Agreement. I understand that I must travel and remain with the group all times and that I must follow all instructions of the staff leader in charge.

Additionally, I understand that I will not be officially registered to attend this trip until payment has been made in full. I also understand that there are NO REFUNDS once payment has been made.

Student Signature:	Date:
(For Students under 18 years ONLY)	
Parent/Guardian Signature:	Date:
OFFICE USE ONLY:	<ul> <li>[ ] Registration &amp; Medical Form Received</li> <li>[ ] Payment Receipt (Cashier's Office) Received</li> </ul>
Date/Time Received:	



## **ALCATRAZ** LIABILITY RELEASE/MEDICAL AUTHORIZATION FORM

As stated in California Code of Regulations, Subchapter 5, Section 5540, I understand that I hold the district, its officers, agents and employees harmless form any and all liability of claims arising out of or in connection with my participation in this activity.

In the event of illness or injury, I herby consent to whatever x-ray, examination, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care from a licensed physician and/or surgeon as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

Name of District: Contra Costa Community College District (Los Medanos College)

**Destination**: Alcatraz (San Francisco, CA) Departure Date & Time: Saturday, May 8, 2010 Return Date & Time: Saturday, May 8, 2010

Medical Insurance Carrier	Address	Policy Number
*If there are any special medica	ll problems, please a	attach a description of the problem to this sheet
In the event of illness or acciden	nt, please notify:	
Name		Phone
		Relationship
Student Signature		Date
Student Name (Print) Address		
(For Students under 18 years ONLY)		
Parent/Guardian Signature:		Date:

All You Need to Know About...



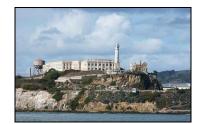
Saturday, May 8, 2010

## **Trip Itinerary**

- 9:30 AM Meet and Check-In at Pittsburg/Bay Point BART Station (Note: BART to Embarcadero Station, take Muni F-line to Pier 33)
- 11:30 AM Arrive at Pier 33 (San Francisco)
- 11:35 PM Ferry to Alcatraz Island
- 12:00 PM Explore & Tour Alcatraz!
- 2:00 PM Ferry back to Pier 33 and walk to Pier 39
- 2:30 PM Free Time at Pier 39
- 3:30 PM Leave Pier 39
- 5:30 PM Arrive at Pittsburg/Bay Point BART Station

Other pieces of info...

- This trip will involve a lot of walking; both to/from public transportation to the ferry station as well as around Alcatraz Island (bring appropriate footwear).
- Weather in San Francisco and especially on Alcatraz Island can be unpredictable. You may want to bring a jacket.
- Your Transportation Tickets and Alcatraz Admission have been paid for and will be issued to you on the trip. You are responsible for anything else (food/snacks/souvenirs) that you wish to purchase.
- There will be no stop for lunch on this trip. Please plan accordingly. There is no food service on Alcatraz. However, you may wish to purchase lunch or a snack during the Free Time at Pier 39.
- You must travel with and stay with the group at all times.



\*Note: There are no refunds once registration has been purchased. No exceptions.

Student Life Office - Los Medanos College - www.losmedanos.edu/studentlife - (925) 439-2181, x3266