



**AUTHORIZATION TO ADMINISTER PRESCRIPTION MEDICATION
FOR OFF-CAMPUS ACTIVITIES**

It is important that School Activity Sponsors are aware of any prescription medication that your child may be taking that could affect his/her well-being during an off-campus activity (e.g., antibiotics, allergy medications, asthma medications). For this medication to be safely administered during school activities outside of a regular school day, please complete every item on the upper portion of this form. Please also complete the appropriate statement regarding the administration of the medication at the bottom portion of this form. A separate authorization form should be completed for each medication. Students will not be allowed to carry any controlled substances (e.g. Dexedrine, Ritalin, Codeine) during any school-sponsored functions. The school employee leading the activity will carry controlled substances and supervise your student's self-administration of this medication. Please provide **ONLY** the amount of medication required for the duration of the activity.

DATE OF ACTIVITY: _____ through _____

STUDENT'S NAME _____ DATE OF BIRTH _____ GRADE _____
Last First

NAME OF DRUG _____ DOSAGE _____ TIMES OF ADMINISTRATION _____

DURATION OF TIME STUDENT WILL BE ON THIS MEDICATION _____

SPECIAL INSTRUCTIONS REGARDING MEDICATION _____

PRESCRIBER NAME _____ PRESCRIPTION # _____

DISPENSING PHARMACY _____ PHONE # _____

.....
PARENTAL/GUARDIAN STATEMENT (Please complete the appropriate statement below):

- I. I/We, the undersigned parent(s)/guardian(s) of _____, request that the school employee leading this activity carry the medication and supervise my/our child's self-administration of this medication.
I/We agree to provide the medication in a pharmacy-labeled container with only the amount of medication required for the duration of the activity. This is **MANDATORY** for any controlled substances, and up to parental preference for other medications.

OR

- I. I/We, the undersigned parent(s)/guardian(s) of _____, believe he/she is competent to carry and self-administer his/her own medication (**excluding controlled substances**) at the appropriate time and in the appropriate way during this activity. I/We give my/our permission for him/her to do so. I/We agree that my/our child will carry the medication in a pharmacy-labeled container with only the amount of medication required for the duration of the activity. We understand that participating school employees will have no responsibility for monitoring students' self-administration of medication. (NOTE: **DO NOT** turn medication in-just this form as student should self-carry to self-medicate.)

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

HOME PHONE: _____ **WORK/CELL PHONE:** _____

CODE OF CONDUCT AGREEMENT

We, the undersigned, do understand and agree to the following CODE OF CONDUCT concerning the trip to Costa Rica from March 15th to March 23rd, 2025:

1. The trip sponsors, Andrés Lucero, Miranda Fleig, and Joelle Shaw, will have authority in any matter and may, at their discretion, put additional restrictions on the group or individual student.
2. Any illegal activity or breach of the rules may result, at the discretion of the trip sponsors, in the student being sent home to Albuquerque immediately. The parents will be financially responsible for the costs incurred in enforcing this rule. Neither Albuquerque Academy nor the trip sponsors, Andrés Lucero, Miranda Fleig, and Joelle Shaw, will be held financially responsible for the costs incurred in enforcing this rule. In such an event, unused trip costs that can be refunded will be refunded at the end of the trip.
3. Good behavior, respect, honesty, and trust are paramount qualities expected. Participants are to act in a way that displays respect for our school and our country. Actions that support individual and group safety and health are always expected.
4. We have read and agree to the general policies and procedures as outlined in the Albuquerque Academy Handbook and Directory, including Summary Regulations adapted from the Albuquerque Academy Handbook and Directory after the signatures.

PARENT NAME (print): _____

PARENT SIGNATURE: _____ DATE: _____

STUDENT SIGNATURE: _____ DATE: _____

INTERNATIONAL TRIP SUMMARY REGULATIONS ADAPTED FROM ALBUQUERQUE ACADEMY STUDENT/PARENT HANDBOOK (p.133)

Summary Regulations

Violations, as summarized below, of school regulations on campus or off-campus in events or programs in which Albuquerque Academy is participating or which it sponsors are subject to the disciplinary procedures in the Albuquerque Academy Student/Parent Handbook.

1. All forms of dishonesty, including but not limited to actions that violate the standards described in the Albuquerque Academy Student/Parent Handbook and by trip policies.
2. Knowingly furnishing false information to the school or trip sponsors, forgery, alteration, or misuse of school or trip documents.
3. Theft, unauthorized possession, damage, or misuse of another's property.
4. Reckless or disorderly conduct or the deliberate intimidation or harassment, including emotional or physical abuse or a threat thereof, of any person.

5. Deliberate disruption or obstruction of the trip itinerary, including interference with the freedom of movement or freedom of speech of any member of the trip. Willful failure to comply with the directions of the trip sponsors.
6. Possession, use (other than that specifically approved by the trip sponsors and parent on the code of conduct), delivery or sale of alcohol or other drugs; being under the influence of alcohol or other drugs; possession or use of tobacco in any form.
7. Possessing a weapon of any kind.
8. Violations of published regulations of the Academy, and/or the trip guidelines, the knowledge of which is the responsibility of the student.
9. In addition, violations of local, state, federal, or foreign laws may render a student subject to disciplinary action at the Academy.
10. All trip rules, including but not limited to curfew, lights out, being in one's room, and those rules listed on the "Code of Conduct."

By participating in the AA Science trip to Costa Rica, students acknowledge these regulations and agree to abide by them. Any violations will be addressed according to the disciplinary procedures outlined in the Albuquerque Academy Student/Parent Handbook.

Release for Participation in the AA Science Costa Rica Trip

The parties to this Release are _____ (Student),
_____ (Student's parents or legal guardian), if the student is under
18, all referred to hereafter jointly and severally as "Student") and Albuquerque Academy.

The student, with the consent of the student's parents or legal guardian, has chosen to participate in the AA Science Costa Rica trip (hereafter "Program") from the 15th day of March to the 23rd day of March 2025.

Assumption of Risk. Student understands and agrees that foreign travel presents risks to Student and her/his property. These can include, among others: unfamiliar or different terrain, climate, food and drink, customs, laws, social and sexual mores, safety practices and regulations, communications, criminal and law enforcement activities, disability access, driving practices, disease risks, and health care. Student is responsible for evaluating the risks she/he may face and is responsible for her/his actions. Any activities that Student may take part in, whether as a component of the Program or separate from it, will be considered to have been undertaken with Student's approval and understanding of any and all risks involved. This includes risks associated with injury, or death such as traffic accidents, assault, and theft.

Adherence to Standards. Student understands and agrees to abide by all policies, rules, and regulations of Albuquerque Academy and all rules, regulations, and laws of the respective countries to be visited. Student further agrees to obey all rules, directions, and precautions issued by Albuquerque Academy or its representatives, by any associated individuals, institutions, or organizations, or by the United States Government.

Termination of Participation. Student shall not engage in inappropriate conduct including the use of physical or verbal violence, open abuse of the customs or mores of the community, and unauthorized absences from classes or other activities. Student understands that, in its sole discretion, Albuquerque Academy or its representative may terminate Student's participation in the Program at any time, including before departure or during the Program. Reasons for termination may include but are not limited to inappropriate conduct or other behavior by Student deemed detrimental to the best interests of the Program; emergencies; or health or safety considerations. Such termination shall not diminish or otherwise alter Student's obligation to make any payment required for the Program, nor shall Albuquerque Academy be required to make any refund to Student.

Release of Claims. In consideration of Albuquerque Academy accepting Student into the Program, Student, his/her heirs, executors, administrators, employers, agents, representatives, insurers, and attorneys, hereby release and discharge Albuquerque Academy its officers, trustees, faculty, employees, agents, and representatives (hereafter "released parties") from responsibility for any accident, illness, injury, or any other consequences arising or resulting directly or indirectly from Student's participation in the Program. The Student recognizes and agrees that the released parties assume no responsibility for any liability, damage, or injury that may be caused by Student's negligence or willful acts committed prior to, during, or after participation in the Program, or for any liability, damage, or injury caused by the intentional or negligent acts or omissions of any other participant in the Program, or caused by any other person.

Indemnification and Hold Harmless. Student hereby agrees to indemnify and hold harmless the released parties from any loss or liability whatsoever including reasonable attorneys' fees, caused by any act or omission of Student resulting from direct or indirect participation in the Program.

Program Modification and Cancellation. Albuquerque Academy reserves the right to cancel or modify the Program before or during its operation due to circumstances including emergencies, low enrollment, unavailability of one or more facilities or personnel, or other reasons.

Severability. It is understood and agreed that, if any provision of this release or the application thereof is held invalid, the invalidity shall not affect other provisions or applications of this release that can be given effect without the invalid provisions or applications. To this end, the provisions of this release are declared severable.

Governing Law. This release shall be construed in accordance with, and governed by, the laws of the State of New Mexico.

Construction and Scope of Agreement. The language of all parts of this release shall in all cases be construed as a whole, according to its fair meaning, and not strictly for or against any party. This release is the only, sole, entire, and complete agreement of the parties relating in any way to the subject matter hereof. No statements, promises, or representations have been made by any party to any other or relied upon, and no consideration has been offered or promised, other than as may be expressly provided herein. This release supersedes any earlier written or oral understandings or agreements between the parties. Student acknowledges that she/he has read this release and that she/he understands its meaning and effect

Student Signature: _____

Date: _____

Parents or Legal Guardian (if student under 18) Signature: _____

Date: _____

Witness Signature: _____

Date: _____

Albuquerque Academy: _____

Official Student Emergency Card

Program Name: AA Science Costa Rica Trip

Program Dates: March 15th-March 23rd

Trip Sponsors and Contact Info: Andrés Lucero (505-263-4536, luceroa@aa.edu), Miranda Fleig (505-220-4501, fleig@aa.edu), and Joelle Shaw (1-505-239-0981, shawj@aa.edu)

Abroad Emergency Contact: Matthew Cook, Latin American Service Expeditions, Costa Rica: +011 506 8839.0515, matt@serviceexpeditions.net, Linktree: <https://linktr.ee/serviceexpeditions>

Embassy/Consulate Phone Costa Rica: 011-506-2519-2000

Albuquerque Academy (U.S.) Emergency Contact: Christine Lenhart 505-688-9218

Student Information-Please write as legibly as possible

Full Name: _____

Date of Birth (MM/DD/YYYY): _____

Passport Number: _____

Issuing Country: _____

Expiration Date: _____

Family (U.S.) Emergency Contact Information:

I. Primary Contact

- **Name:** _____
- **Relationship to Student:** _____
- **Phone Number (Primary):** _____
- **Phone Number (Alternate):** _____
- **Email Address:** _____

MEDICAL AUTHORIZATION FOR TREATMENT OF MINOR

IN CASE OF EMERGENCY I AUTHORIZE Andrés Lucero, Miranda Fleig, and Joelle Shaw TO OBTAIN MEDICAL TREATMENT FOR MY SON/DAUGHTER, _____ AND ANY HOSPITAL EMERGENCY DEPARTMENT PHYSICIAN AND/OR ANY MEMBER OF THE HOSPITAL MEDICAL STAFF REQUESTED BY A HOSPITAL EMERGENCY DEPARTMENT PHYSICIAN TO MAKE SUCH EXAMINATIONS AND RENDER SUCH MEDICAL AND/OR SURGICAL TREATMENT INCLUDING ANESTHETIC AND DENTAL WHICH IN HIS OR THEIR JUDGMENT MAY BE DEEMED NECESSARY FOR MY CHILD'S HEALTH AND WELFARE.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

NOTARY:

State of _____

County of _____

Signed or attested before me on _____ **by** _____

Seal

Notary

My commission expires: _____

PARENTAL PERMISSION FOR A MINOR TO TRAVEL ON THE AA SCIENCE COSTA RICA TRIP

I/We the parent(s), legal guardian(s) of _____, age _____, give permission for my/our daughter/son to travel to Costa Rica to participate in the AA Science Costa Rica trip from March 15th to March 23rd, 2025.

_____ will be accompanied and chaperoned by
Andrés Lucero, Miranda Fleig, and Joelle Shaw.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

NOTARY:

State of _____

County of _____

Signed or attested before me on _____ **by** _____

Seal

Notary

My commission expires: _____

RELEASE AND AGREEMENT

DESTINATION: Costa Rica

PURPOSE OF TRIP: microplastic water sampling, fish reproductive system analysis, and *E. coli* monitoring for the Indigenous Bribri as well as cultural immersion

DATES OF TRIP: **March 15th-March 23rd, 2025**

I, the undersigned, agree to the following understandings:

1. I agree to release Albuquerque Academy and the trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw**, from, and not to hold such parties responsible for, any claims, demands liabilities, and causes of action arising out of, or connected to personal injury, illness, death or property damage resulting from any cause whatsoever. I agree to indemnify, defend, and hold harmless the above-named from any damage resulting from events over which they exercise no control, such as Acts of God, strikes, or government restrictions. I further agree to indemnify said parties from any claims, liabilities, costs, or expenses arising out of personal injury or property damage that I either cause or contribute to while participating in the AA Science Costa Rica trip and from any financial obligations which I may incur of my own behalf.
2. The right is reserved to make changes to the trip for the safety, comfort, or convenience of members of the group, whenever in the sole judgment of the trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw**, such changes are deemed necessary. The right is further reserved to refuse to accept or retain any person as a member of this trip prior to departure or during the course of the trip.
3. No responsibility is incurred by trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw**, for loss of passport, airline or train tickets, or other documents, or damage to luggage or any personal belongings.
4. I am authorized to travel in any vehicle driven by the trip sponsors or approved by the trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw** if the need arises.
5. If I become ill or incapacitated, the trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw**, may take actions necessary for my safety and well-being, including securing medical treatment and transporting me home at my own expense. I fully release Albuquerque Academy and the trip sponsors, **Andrés Lucero, Miranda Fleig, and Joelle Shaw**, from any liability for such action as may be taken on my behalf.
6. This agreement will be governed by the law of the State of New Mexico.

SIGNATURE OF STUDENT/PARTICIPANT

DATE

I, the parent or legal guardian of the above-named student, have completely read and fully understand the foregoing "RELEASE AND AGREEMENT" and agree to be bound thereby and to cause the above student to comply therewith.

SIGNATURE OF PARENT/GUARDIAN

DATE

NOTARY:

State of _____

County of _____

Signed or attested before me on _____ **by** _____

Seal

Notary

My commission expires: _____