

Raymond School District Policy – EEAF-R\*

STUDENT OVERNIGHT TRAVEL

School: Raymond High School  
Organization: Class of 2018  
Faculty Advisor: Shelley Tudisco & Tricia Wentworth  
Sponsor (if other): \_\_\_\_\_  
Destination: Lake George, NY  
Dates: Departure: May 19, 2018 Return: May 21, 2018  
Any Days of School Missed?: Monday, May 21  
How Many?: one

Insurance Coverage  
By Travel Group

Insurance Agency: Zurich American Insurance Co.  
Attach Copy

Certificate of Insurance: EOL0188462-00  
Number of Insurance Certificate

Amount: 1

Cost Per Student: \$ ~560.<sup>00</sup> Total Number of Students: approx. 50

Cost to School: \$ — Total Number of Chaperons: 5-7  
(if any)

Transportation Provided by: Plymouth Travel

Fully Insured: - Name of Insurance Co. \_\_\_\_\_

Educational Purpose of Trip: senior class trip

Detailed Itinerary: (Use attached sheet if necessary)

see attached itinerary - potential change  
of dinner cruise to bowling or movie w/dinner.

Reviewed: May 16, 2002

**Raymond School District, SAU 33  
FIELD TRIP PERMISSION SLIP (Overnight)  
Raymond High School  
ACKNOWLEDGEMENT OF WARNING AND CONSENT AGREEMENT**

I/We, \_\_\_\_\_ am/are the parent(s) or guardian(s)

of \_\_\_\_\_, a student, who desires to participate in the following

school activity: Senior Class Trip - Lake George, NY

Date of Event: 5/19-5/21/18 Cost to Student: \$ 560-

Rain Date: N/A

Departure Time: 6:30am (5/19) Return Time: 6:30pm (5/21)

Teacher(s) in charge: Shelley Tudisco & Tricia Wentworth

Lunch Arrangements: \_\_\_\_\_

I/We acknowledge that I/we have been informed as to the nature of the activity, and that this activity has risks of injury associated for those who participate, including transportation from and to the school campus. Although the school staff will endeavor to provide each participant with due care, the school cannot ensure that my/our child will remain free of injury. If the returning time is after school hours, I will be responsible for my child's transportation home from the school. Students will not drive.

I/We understand the school cannot ensure the safety for children and that the school's obligation is to take reasonable precautions for safety and well being. Our child also has a responsibility for his/her safety and the safety of others.

I/We acknowledge that I/we must provide the staff with any medical or other information which I/we feel is important for the school to know about our son/daughter. This information must be kept confidential. I/We will provide medical and any other information on our child prior to the start of this activity. The School district will rely on me/us to provide this additional information.

I/We acknowledge that in an emergency the school will make every effort to contact one of us. In the event the school is unable to do so, I/we authorize any medical treatment deemed necessary by a physician, hospital or other health care provider be provided to my/our child. I/We also give permission for the transport of my/our child to/from a doctor and/or hospital by an ambulance.

I/We acknowledge my/our child must adhere to all rules, regulations, and instructions pertaining to the safety and protection of the participants, and that failure to comply could exclude my/our child from participation in this activity.

I do hereby release the Raymond School District, its agents and employees, from any and all liability and claim either we or my child may suffer as a result of participation in this trip.

\_\_\_\_\_  
Parent(s) or Guardian(s) Signature Date

Address: \_\_\_\_\_

Telephone: Home/Cell \_\_\_\_\_

Telephone: Work \_\_\_\_\_

- Instructions:**
1. Please read entire form. If there is anything about this form or the described activity that you do not understand, do not sign the form until you have obtained a complete explanation.
  2. Fill in all the blanks.
  3. If you have more than one child participating, complete one form per child



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## **S&H Underwriters, Inc.**

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P.O. Box 176                      3030 US Rt 2  
East Montpelier, VT 05651

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Date: January 27, 2017

To: Kira Estes - Insurance Savers Agency

Fax: (603) 726-3606

From: Tammy Lawrey Underwriter

Phone: 802-229-5660, Ext. 110

Email: [tlawrey@sh-underwriters.com](mailto:tlawrey@sh-underwriters.com) Fax: 802-229-5669

Re: Insured: , Plymouth Travel

Proposed Effective Date: 1/26/2017

Coverage: Commercial General Liability

Reference #: 0687164E

## CONFIRMATION OF COVERAGE

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

**DATE ISSUED:** January 27, 2017

**PRODUCER:** Insurance Savers Agency  
P.O. Box 685, Uhlman Drive  
Campton, NH 03223-0684

**INSURED:** Plymouth Travel  
PO Box 3,  
Holderness, NH 03245

**INSURER:** Zurich American Insurance Company  
Non-Admitted

**POLICY NO.:** EOL0188462-00

**COVERAGE:** Commercial General Liability

**POLICY PERIOD:** 1/26/2017 TO 1/26/2018

**TERM:** 12 Months

12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

**LIMITS OF LIABILITY:** \$1,000,000 Each Occurrence  
\$1,000,000 Policy Aggregate

**DEDUCTIBLE:** \$1,000 Deductible - Defense and Indemnity

**PREMIUM:** \$1,363.00

**FEES:** Policy Fee \$150.00  
Carrier Policy Fee \$20.00

**TAXES:** Surplus Lines Tax \$40.89

**TRIA PREMIUM:**

**TOTAL:** \$1,573.89

**POLICY FORM:** See Mkt quote

**TERMS / CONDITIONS:**

(a) 25 %MINIMUM EARNED PREMIUM AT INCEPTION.

**(b) ENDORSEMENTS / NOTABLE EXCLUSIONS:**

Form No.: U-TAP-120-B-CW (03/06) - Occurrence Form  
Coverage: Travel Agents and Tour Operators Professional Liability Insurance  
See attached sample policy

**(c) ATTACHMENTS / SUBJECT TO:**

Subject to: A completed order form attached and the below.

Currently signed and dated applications.

Additional Requirements:

A copy of the applicant's Crisis Management/Emergency Plan. If one is not currently being used, it must be implemented prior to binding coverage. Please refer to the attached outline for recommendations on what this plan should include.

**Endorsements**

The following coverage enhancements may/will be added to the policy. Any item indicating no charge or included will automatically be added to the policy. Please refer to the attached coverage enhancement sheet for further details.

**Cost**

- Advertising Injury \$100.00
- Additional Insured - First five No Charge
- Additional Insured - After five, each additional \$50.00
- Extended General Liability \$200.00

Excludes: Hired/Nonowned Auto but can be considered

**(d) ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

**COMMISSION:**                      7.5%

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

**PREMIUM PAYMENT IS DUE WITHIN FOURTEEN (14) DAYS FROM EFFECTIVE DATE UNLESS OTHERWISE STIPULATED.**

**AUTHORIZED REPRESENTATIVE**  
**Tammy Lawrey, Underwriter**

**TOTAL NUMBER OF PAGES: 2**  
**INSURED: , Plymouth Travel**  
**DATE ISSUED: January 27, 2017**

#560

10/16/2017

## Raymond Class of 2018 LAKE GEORGE ADVENTURE

### Day 1, May 19, Saturday

6:30 AM

#### **Departure from School**

Sit back and rest for the events ahead. Enjoy an onboard movie while we head towards Waterbury and then on to Lake George. Our modern **motor-coach** is air-conditioned, wifi and restroom-equipped.

11:00 AM – 6:00 PM

#### **Great Escape Amusement Park & Splash Water Kingdom**

Spend the day at this incredible amusement and water park. Enjoy over 100 rides, shows and attractions including the COMET — voted “#5 Best Roller Coaster in the Country!”

6:00 PM

#### **Check in to the Great Escape Lodge**

8:00 PM

#### **Lake George Cruise**

Enjoy a 2-hour cruise on Lake George with **buffet dinner and a DJ** on board.

### Day 2, May 20, Sunday

8:00 AM

#### **Group Breakfast**

10:00 AM

#### **Great Escape Indoor Waterpark**

Get ready for over 38,000 square feet of **splashes, swirls, spills, squeals and smiles!** Kids and adults alike float leisurely on inner-tubes, enjoy the thrills of a **white-water rafting** experience, catch a wave and do some surfing, ride the tubes through curls and tunnels, or explore a treehouse full of slides and water features. The weather is always a **balmy 82 degrees**, so grab your suits and swim shoes and get ready to make a splash.

3:00 PM

Free time for shopping and exploring "Canada Street"

6:30 PM

**Skateland with Pizza Dinner**

Spend 3 hours with unlimited use of Go-Karts, Roller Skating, Laser Storm and the Miniature Golf.

**Day 3, May 21, Monday**

7:45 AM

**Group Breakfast at Mc Donalds**

8:30 AM

**Hudson River Gorge River Rafting**

A 17 Mile, full day adventure awaits you today. We start the trip with a dam release that creates a man-made rapid in the Indian River for the first 3.5 miles. From there, you'll barely have time to catch your breath before we enter the confluence of the Hudson River and the Blue Ledge, Mile Long and Kettle Rapids. The river continues to drop 500 feet over the next 13 miles, which makes for thrilling, rolling rapids, majestic pools and beautiful scenery. **Wet suits are provided and a lunch in route will be served.**

2:30 PM

Depart for school, estimated time for arrival 6:30 PM