

Trip Request Form

NOTE: For trips requiring Board approval (all overnight trips), this form must be routed through the Principal and Superintendent and to the Board at least one (1) week prior to the next regularly scheduled Board meeting. For other trips, submit this form to the Principal at least two (2) weeks prior to the trip.

SCHOOL : TRIGG COUNTY HIGH SCHOOL

FACULTY MEMBER(S) SPONSORING TRIP: ANDREW MROCH

TYPE OF TRIP (Check one):☒ Other (athletic, band, if applicable) Band

DESTINATION: DOVER, TN ADDRESS: STEWART COUNTY HIGH SCHOOL 120 ROBERTSON HILL RD, DOVER, TN 37058

PHONE: (931) 232-5179

DATE(S) OF TRIP: SEPTEMBER 29, 2018 DEPARTURE TIME: 2:00 PM (ESTIMATED)

RETURN TIME: 11:00 PM (ESTIMATED)

PURPOSE/EDUCATIONAL VALUE: COMPETE IN THE STEWART COUNTY MARCHING BAND COMPETITION

SOURCE OF FUNDING FOR TRIP: HIGH SCHOOL BAND ACTIVITY ACCOUNT

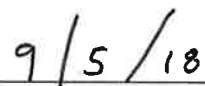
BILL TRIP EXPENSES TO: ☒ Sponsoring Organization**PARTICIPANTS**

Number of Students: 63 Faculty Sponsors: 2 Other Chaperones: 6 Total # of Participants: 63

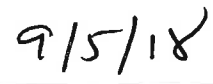
TRANSPORTATION

Is District transportation needed? Yes

☒ Bus: 2Have all chaperones undergone the required records check and been designated by the Principal/Designee to supervise students? ☒ Yes

Faculty Sponsor's Signature

Date

Principal's Signature

DateTrip has been ☐ approved ☐ disapproved. Reason for disapproval _____

Superintendent/Designee's Signature_____
Date

The Board must approve overnight trips.

Date of Board approval: _____ Order Number: _____