

School-Related Student Day Trip and Overnight Trip Request Forms

THIS FORM MUST BE SUBMITTED TO THE PRINCIPAL TWO (2) WEEKS PRIOR TO THE TRIP. IF BOARD APPROVAL IS REQUIRED, THE BOARD MUST RECEIVE THE FORM AT LEAST TWO (2) TWO WEEKS IN ADVANCE OF TRIP.

INFORMATION

1. Sponsor's Name Jon Newton Club or Dept Boys Basketball
 2. Name of all chaperones Newton, Hoile, Himmelheben
 3. Where will the group be going? Sikeston, Missouri
 4. Purpose of the trip Basketball tournament
*If the trip is a State Competition Trip, meals will be reimbursed at a daily rate of \$40.00, and must be accompanied by receipts.
 5. When is it to be held? Date June 14-15 Departure Time TBA
Estimated Travel Time 3.5 hrs
 6. City Sikeston, State MO Estimated Distance (Round trip) 400 miles
 7. Place of overnight lodging (name, address & phone #) Holiday Inn Express
 8. Identify students by name (use attached sheet, if necessary) Attach
 9. Cost to students - Cost to school organization \$1500 Cost to Board -
 10. Describe the relevance of the trip: educational, cultural, etc./educational activities To gain experience and opportunity to play games
 11. Other activities planned N/A
 12. How will this trip benefit your students? Game experience
 13. Type of transportation used Bus
 14. Have trip permission slips been signed and are they in the possession of trip sponsor or leader?
☒ Yes ☐ No If NO, indicate why: _____
- [Signature] 5-14-19 [Signature] 5/13/19
Sponsor's Signature Date Principal's Signature Date

Trip has been ___approved___ disapproved. If disapproved, explain below:

Signature of Superintendent/Designee

Date

Board Approval Date