

This form is to be used by the staff when requesting permission to take a field trip. The completed form is to be submitted to the Superintendent one (1) week in advance of the next scheduled meeting of the Board. Complete pertinent information on next page.

Destination Charleston, South Carolina (Carolina Invitational)

Date(s) of Trip 12/28/19-12/31/19 Time of Departure TBA \*Time of Return TBA

Approximate Mileage (one way) 600

Approximate Number of Students 20 Approximate Number of Adults 3

Number of Buses Required 0 Method of Transportation (if not school bus) Charter Bus

Will you stop for lunch?  YES  NO If "YES", where? TBA

**TEACHER IS RESPONSIBLE FOR NOTIFYING CAFETERIA OF DETAILED LUNCH PLAN**

Number of Instructional Days lost 0 Justification: What is to be learned preparation for the remainder of season

How will the experience be used and evaluated? preparation for remainder of season

Names of chaperones (if applicable) Donnie Swiney, Derek Pfeiffer,

Have all chaperones undergone the required records check and been designated by the principal/designee to s  
 YES  NO

**TRIP INFORMATION**

Financial Costs		Method of Payment	
Mileage (estimate)	\$ <u>\$5,500.00</u>	Student Payment	<u>\$0</u>
Driver (estimate)	\$ <u>—</u>	School Activity Acct	<u>0</u>
Hotel	\$ <u>\$4,000.00</u>	Athletic Boosters	<u>\$10,775.00</u>
Meals	\$ <u>\$1,000.00</u>	Band Boosters	<u>\$</u>
Admission	\$ <u>\$275.00</u>		
<b>TOTAL</b>	<b>\$ <u>\$10,775.00</u></b>		

- Just Varsity  
 - all Boosters funds from  
 Summer 2019  
 Shootout

Requested by Donnie Swiney Date 5/29/19

Approved/Disapproved *[Signature]* Principal 6/5/19 Date 6/5/19  
*SBDM* ✓

Approved/Disapproved \_\_\_\_\_, Superintendent Date \_\_\_\_\_

- [Signature]* Principal approval for all field trips.
- [Signature]* Superintendent approval is required for all field trips over 65 miles one (1) way.
- [Signature]* Superintendent approval is required for all overnight field trips.

\*On school days, the return time should not exceed 2:00 p.m.