

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 KHSAA State Cross Country Meet, Kentucky Horse Park

Date(s) of Trip October 30-31, 2020 Time of Departure 2:00 PM *Time of Return 6:00 PM

Approximate Mileage (one way) 105

Approximate Number of Students 20 Approximate Number of Adults 3

Number of Buses Required 1 Method of Transportation (if not school bus) _____

Will you stop for lunch? YES NO If "YES", where? Fazolis/Johnny Carinos

TEACHER IS RESPONSIBLE FOR NOTIFYING CAFETERIA OF DETAILED LUNCH PLAN

Number of Instructional Days lost 0 Justification: What is to be learned _____

How will the experience be used and evaluated? _____

Names of chaperones (if applicable) Jack Breunig, Jo Anna Breunig, Jason Hayes

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>\$312.00</u>	Student Payment	\$ _____
Driver (estimate)	\$ <u>\$220.00</u>	School Activity Acct	\$ _____
Hotel	\$ <u>\$1,300.00</u>	Athletic Boosters	\$ _____
Meals	\$ <u>\$900.00</u>	Band Boosters	\$ _____
Admission	\$ _____		
TOTAL	\$ <u>\$2,732.00</u>		

Requested by Jack R. Breung Head Cross Country Coach Date 8/7/20

Approved/Disapproved _____, Principal Date _____

Approved/Disapproved _____, Superintendent Date _____

_____ Principal approval for all field trips.

_____ Superintendent approval is required for all field trips over 65 miles one (1) way.

_____ Superintendent approval is required for all overnight field trips.

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