

School-Related Student Trip Proposal Form**SIMPSON COUNTY SCHOOLS****Teachers/Activity Sponsors:** Requests should be made to the Principal at least 2 weeks prior to the trip.

Staff Name: <u>Brooklyn Holder</u>	Submission Date: <u>9-6-23</u>
School: <u>FSHS</u>	Grade/Class/Group: <u>9th-12th</u>

Name of Event/Activity: <u>FSHS UCA Nationals</u>	Location: <u>Orlando, FL</u>	
Date of Event/Activity: <u>2/1/24 - 2/13/24</u>	Departure Time: <u>10 am</u>	Return Time: <u>10:25 am</u> → <i>Flight times</i>
Description of Event/Activity (include educational purpose): <u>UCA organization works closely with KHSAA in cheer. Our team would like to represent FSHS at the national level. This event allows us to compete against the top schools in the country.</u>		

# of Students: <u>20</u>	# of Adults: <u>2 coaches</u>
Fees (Note: Parents may see a higher fee due to an administrative fee that may be added. Your school bookkeeper and Principal will determine the final costs of all trips.)	
Fee per Student: <u>\$1,604.55</u>	Fee per Adults: <u>\$1,604.55</u>
Fee to be paid by (check all that apply): <u>BOYSER CLUB covers it all</u> School: <input type="checkbox"/> Student/Adults: <input type="checkbox"/>	
Transportation (check all that apply): Bus: <input type="checkbox"/> Walk: <input type="checkbox"/> Other: <input checked="" type="checkbox"/> (Please specify): <u>Southwest airlines</u>	
Meals (check all that apply): None: <input type="checkbox"/> Provided by School: <input type="checkbox"/> Provided by Parent: <input checked="" type="checkbox"/> Other: <input type="checkbox"/> (specify service and location):	

Posting Date (parents will see item online this date):	
Purchase Deadline (date until trip will be available online):	
Revenue Coding/Deposit Category:	

This field trip is part of the instructional program and will contribute significantly to the achievement of the School's/District's instructional goals. All chaperones have undergone the required records check and have been approved by the Principal/designee to supervise students.

Brooklyn Holder

Signature of Teacher

[Signature]

Signature of Principal

[Signature]

Approved by Superintendent

9-6-23

Date

9/12/23

Date

Date

Return form to school bookkeeper.