

Henderson County Schools Transportation Department
 5675 Airline Road
 Henderson, Ky 42420
 Phone: (270) 831-5120
 Fax: (270) 831-5122

Mailing Address:
 ATTN: Transportation
 1805 Second St.
 Henderson, Ky 42420



Overnight and Out of District School Bus Trip Guidelines

During overnight school bus trips and out of district bus trips, all adults have to understand the seriousness of their responsibilities and the legal liabilities in supervision. The adults must have knowledge of where students are at all times and must be in close proximity to the students.

- All KHSAA guidelines and board policies should be adhered to.
- All sponsors and head coaches should ride on the bus with the team/students.
- Student:Adult ratios should be followed: Elementary 10:1 Secondary 15:1
- Sponsors and coaches shall be trained annually to administer medication

Checklist:

Sponsor/Coach Name: Laura Staffeld Cell Number: 812-499-4157
 Date of Departure: Nov. 3 Time of Departure: TBD
 Date of Return: Nov. 4 Expected Time of Return: TBD

Adequate Supervision (meets ratio criteria)

Please List Names of Chaperones

Obtain parent/guardian permission forms

Athletic teams/clubs do not need to get a separate permission form for every trip. One at the beginning of the season/year from each student is sufficient

Notify school cafeteria manager of any lunch needs

Follow all Transportation Department guidelines for bus trips

All requests must be in the trip system at least five days prior to the date of departure

Understand any student's medication needs and/or medical conditions

Coaches must carry all player's physicals on any away and overnight trips

Attach a trip list of students to the principal/designee and a rider's list to the bus driver

Rider's list must contain all rider's names and an emergency contact name and number

Attach and itinerary TBD once times are released for Laura

Other specific needs:
Laura Staffeld
 Signature of Person submitting form

[Signature]
 Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.

MURRAY STATE UNIVERSITY
DEPARTMENT OF MUSIC
QUAD STATE CHORAL FESTIVALS



Murray Area Hotels - TBD

Quality Inn	1210 North 12th Street	270-759-5910
Best Western University Inn	1503 North 12th Street	270-753-5353
Springhill Suites by Marriott	1512 North 12 th Street	270-917-8000
Hampton Inn	1415 Lowes Drive	270-767-2226
Holiday Inn Express and Suites	1504 North 12th Street	270-759-4449

Chap

Students

- Alexis Weaver
- Diamond McGuire
- Hailey Engusath
- Jenna Engusath
- Lilly Briscoe
- Logan Duncan

- Laura Staffeld
- Kim McGuire

October 3, 2024

Dear School Board Members,

On Wednesday, November 6, 2024 HCHS FBLA is asking permission to take 3 students to the FBLA Fall Leadership Conference in Columbus, Ohio at the Greater Ohio Convention Center. The students will be accompanied by Danna Robinson.

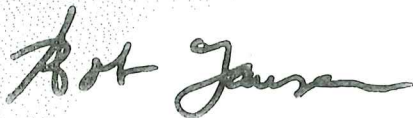
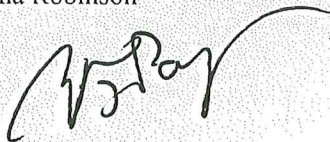
We will leave on Wednesday, November 6 and return on Saturday night, November 9.

The students that are requesting to be able to attend are Landon Chandley, Local Chapter President, Jaxon Robinson, Region 1 Historian, and Caleb Fish. Landon is currently serving as FBLA Region 1 President and is on the State FBLA Board. The students are all local FBLA officers and will benefit from the breakout sessions and seminars provided at the training.

Thanks,



Danna Robinson



Itinerary

FBLA National Fall Leadership Conference

Columbus, Ohio

WEDNESDAY, NOVEMBER 6, 2024

- Travel to Columbus

THURSDAY, NOVEMBER 7, 2024

- City Tour
- 4:00-6:00 PM: Early Check-In

FRIDAY, NOVEMBER 8, 2024

- 7:30-8:30 AM: Conference Check-In
- 8:30-9:15 AM: Opening General Session
- 9:15-11:45 AM: Business & Leadership Skill Labs – Morning Block
 - Business & Leadership Skill Labs are hands-on experiences designed for attendees to specialize in a skill of their choice.
 - Attendees will sign-up for labs during registration.
- 12:00-1:30 PM: Lunch & Future Leaders Expo Hall
- 1:30-4:00 PM: Business & Leadership Skill Labs – Afternoon Block
- 5:00-7:00 PM: FBLA Night at Medieval Times

SATURDAY, NOVEMBER 9, 2024

- 8:00 AM-12:00 PM: Breakout Sessions and Expo Hall
 - Attendees will have the opportunity to attend a variety of sessions including networking opportunities, professional development workshops, and visit the expo hall.
- 12:00-12:45 PM: Closing General Session
- 1:00-5:00 PM: Explore the city!
- 6:00 PM: Travel back to Henderson

Members Attending:

Landon Chandley, Jaxon Robinson, Caleb Fish

Adviser Attending: Danna Robinson



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Checklist:

Sponsor/Coach Name: Danna Robinson Cell Number: 2708600453

Date of Departure: 11/6/2024 Time of Departure: 11:30 am

Date of Return: 11/9/2024 Expected Time of Return: 11:30 pm

Adequate Supervision (meets ratio criteria)

Please List Names of Chaperones

Obtain parent/guardian permission forms

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Notify school cafeteria manager of any lunch needs

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Attach and itinerary

Other specific needs: _____

Danna Robinson
Signature of Person submitting form

Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.



Trip ID#: 05251

Henderson County Schools Transportation Request for Extracurricular Trips

Requested by:		Danna Robinson			
Date Submitted:		10/3/24	School:		HCHS
Group:		FBLA			
Funding Source for Trip Cost:		060218c 0894.106L			
Destination:		Columbus, Ohio			
Purpose of Trip:		National Fall Leadership Conference FBLA			
Date(s) of Trip:		11/6/2024 - 11/9/2024			
		Departure Time (CST)		Arrival Time (CST)	
To the Event:		11:30	AM / <input checked="" type="radio"/> PM	6:30	AM / <input checked="" type="radio"/> PM
On Return Trip:		6:00	AM / <input checked="" type="radio"/> PM	11:30	AM / <input checked="" type="radio"/> PM
Street:		400 N. High Street			
City, ST:		Columbus, Ohio	ZIP	43215	
Number of Students		3	Number of Adults		1
		Total:		4	
Number of Vehicle(s) Required:		Bus	<input checked="" type="radio"/> SUV	1	Car
		Will you require a handicap-accessible bus?			Yes <input type="radio"/> No <input checked="" type="radio"/>
		Does the driver need to remain with group during the event?			Yes <input checked="" type="radio"/> No <input type="radio"/>
Emergency Contact Number of Sponsor:		(276) 860 - 0455			
Additional Requirements:					
Medical Needs:					
Employee Signature:		<i>Danna Robinson</i>			

Office Use	ORG:		PROJ:	
	Principal Approval:	<i>[Signature]</i>		
	Date of Approval:	10/14/24		

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Checklist:

___ Sponsor/Coach Name: Jacey Boston Cell Number: 270-830-9368

___ Date of Departure: 11-16-24 Time of Departure: 11:00

___ Date of Return: 11-17-24 Expected Time of Return: _____

Adequate Supervision (meets ratio criteria)
 Please List Names of Chaperones

Obtain parent/guardian permission forms
 Athletic teams/clubs do not need to get a separate permission form for every trip. One at the beginning of the season/year from each student is sufficient

Notify school cafeteria manager of any lunch needs

Follow all Transportation Department guidelines for bus trips
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Understand any student's medication needs and/or medical conditions
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Attach and itinerary

___ Other specific needs: _____
Jacey Boston
 Signature of Person submitting form

Bob Jansen
Robert Thomas
 Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.

HCHS VARSITY CHEERLEADING

Competition Team

Cheerleader Name	Cheerleader Name
Maya Blandford	Kanna Mackellar
Lina Bounaira	Hannah McCracken
Ainsley Dalton	Whitney Mills
Hadley Eblen	Reese Rendle
Sophia Fulcher	Annaleigh Richard
Meryl Grogan	Meah Risley
Jacy Hargiss	Presley Royalty
Praislynn Henderson	Lilly Shelton
Sophie Joyce	Sadie Smith
Kaylee Kennedy	Kate Wolfe
Paisley Lancaster	Sarah Yeary
Madi Latta	Addalie Zehner
Coach: Jacey Boston	Coach: Sherry Blosser
Coach: Tony Rutledge	Coach: Rhonda Richard

November 16, 2024
Estimated Itinerary for UCA Competition

11:00 AM	Leave HCHS
3:00 PM	Arrive at Noblesville, IN Holiday INN Express
3:15 PM	Assign Rooms
4:00 PM	Dinner as a team
8:00 PM	Return to hotel/Team Meeting
10:00 PM	All athletes in their rooms & bed checks

November 17, 2024

7:00 AM	Wake Up Call
8:00 AM	Breakfast
8:30 AM	Get Ready
9:30 AM	Leave for Competition,
10:30-1:00	COMPETITION/AWARDS
1:30 PM	Parents sign athletes out & return home

STUDENTS

09.36 AP.21

Transportation Request Form
(for bus or car)

EDUCATIONAL, EXTRA-CURRICULAR AND/OR OVERNIGHT TRIP
(Submit to Transportation Department at least five (5) days prior to date of departure.)

SCHOOL South Middle REQUESTED BY: Jeremy Shultz
CLASS/ORGANIZATION: KYA
Departure Date and Time: 12/8/24 9:00 AM CST
Return Date and Time: 12/10/24 10:30 AM EST
Destination: Crown Plaza, 830 Phillips Ln, Louisville, KY 40209
Purpose/Expected Benefits: KYA State Conference
Is a Bus or Car Needed? Bus Has a Driver Been Contacted?
Number of Students: 35 Number of Chaperones: 3

Prepare three (3) lists of all persons going on a trip: one for the Principal, one for the bus/car driver, and one for the certified person accompanying the students.

HAVE ALL CHAPERONES UNDERGONE THE REQUIRED RECORDS CHECK AND BEEN DESIGNATED BY THE PRINCIPAL/DESIGNEE TO SUPERVISE STUDENTS? YES NO

APPROVED AS SUBMITTED: _____

DISAPPROVED FOR THE FOLLOWING REASON: _____

Paid By School Allotment _____ Other _____

Stacy Fra (name of account) _____
Principal's Signature Date 11/1/24

Board Approval/needed for overnight trips _____ Date _____

RELATED PROCEDURES:

09.36 (all procedures)

Review/Revised: 9/19/2016

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Checklist:

✓ Sponsor/Coach Name: Stephen Haile Cell Number: (270) 823-2470

✓ Date of Departure: December 28, 2024 Time of Departure: 8:00 am

✓ Date of Return: December 30, 2024 Expected Time of Return: 9:00 pm

✓ Adequate Supervision (meets ratio criteria)

****Please List Names of Chaperones**** Stephen Haile, Danny Perkins, Derek Mary Beth, Adrienne Phillips, Parker, Cruse

✓ Obtain parent/guardian permission forms

****Athletic teams/clubs do not need to get a separate permission form for every trip. One at the beginning of the season/year from each student is sufficient****

✓ Notify school cafeteria manager of any lunch needs

✓ Follow all Transportation Department guidelines for bus trips

****All requests must be in the trip system at least five days prior to the date of departure****

✓ Understand any student's medication needs and/or medical conditions

****Coaches must carry all player's physicals on any away and overnight trips****

✓ Attach a trip list of students to the principal/designee and a rider's list to the bus driver

****Rider's list must contain all rider's names and an emergency contact name and number****

✓ Attach and itinerary

Other specific needs: _____

Stephen Haile

Signature of Person submitting form

[Signature]

Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.

**LADY COLONEL BASKETBALL
LADY INVITATIONAL OF THE SOUTH
TOURNAMENT ITINERARY**

December 27

1:00 Depart for Scottsville and 1st Round tournament game
4:00 Play & win
9:00 Return to Henderson

December 28

TBA Depart for Scottsville and 2nd Round tournament game
TBA Play & win
TBA Return to hotel/Team dinner

December 29

TBA Team breakfast at hotel
TBA Pre-game meal
TBA Play & win
TBA Return to hotel/Team dinner

December 30

TBA Team breakfast at hotel
TBA Pre-game meal
TBA Play & win
TBA Return to Henderson

**2024-25 HENDERSON COUNTY LADY COLONELS
MASTER TRIP ROSTER**

<u>Name</u>	<u>Class</u>
JaNyla Locher	Sophomore
Bella Estabrook	Freshman
Azayah Hall	Sophomore
Addy Gish	Junior
Jersey Gardner	Freshman
Anna Kemp	Senior
Allyson Rideout	Senior
Rashia Cansler	Senior
A'Tylia Green	Junior
Brooklyn Gibson	Junior
Callie Burnett	Freshman
Ashlynn Tompkins	Freshman
Peyton London	Sophomore
Saylor Brown	Freshman
Maggee Melvin	Freshman
NeVaeh Dixon	Freshman
Emme Sword	Freshman

HEAD COACH: Stephen Haile

ASSISTANT COACHES: Danny Perkins, Mary Beth Parker, Derek Phillips, Adrienne Cruse

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Checklist:

___ Sponsor/Coach Name: Chelsie Staples Cell Number: 270.577.3330

___ Date of Departure: 12/28/24 Time of Departure: 8:45 AM

___ Date of Return: 01/01/25 Expected Time of Return: 7:00 pm

___ Adequate Supervision (meets ratio criteria)

Please List Names of Chaperones

Chelsie Staples

___ Obtain parent/guardian permission forms

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NA Notify school cafeteria manager of any lunch needs

NA Follow all Transportation Department guidelines for bus trips

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___ Attach and Itinerary - Varsity Spirit Citrus Bowl - Orlando, FL

___ Other specific needs: _____

Chelsie Staples
Signature of Person submitting form

Andrew Thomas
Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.

1. Chelsie Staples
2. Adelyn Boswell
3. Laney Morris
4. Jacey Wallace

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Checklist:

Sponsor/Coach Name: Chelsie Staples Cell Number: 270-577-3330

Date of Departure: 02/11/25 Time of Departure: 5:30 PM

Date of Return: 02/18/25 Expected Time of Return: 7:00 PM

Adequate Supervision (meets ratio criteria)

Please List Names of Chaperones**

Chelsie Staples / Lauren Wright

Obtain parent/guardian permission forms

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on the back

Rider's list must contain all rider's names and an emergency contact name and number**

Attach and Itinerary 2025 NDA National Competition, Orlando-Florida

Other specific needs:

Staples

Signature of Person submitting form

Chelsie Staples

Signature of Principal/Designee

This form must be submitted 10 days prior to the date of the trip to the principal or designee.

1. Adelyn Boswell
2. Lacey Morris
3. Jacey Wallace
4. Carter Cleveland
5. Molly Stone
6. Kaelyn Kyle
7. Isabella Smith
8. Kate Thomas
9. Grac Hopgood
10. Hannah Vaughn