

Field Trip Planning Form

This form is to be used when students take any trip off campus for school purposes.

School: Ignite Institute Grade(s): 9-12 Class/Activity Group/Team: PiBotics FRC - Rocket City Regional
 Teacher/Sponsor/Coach: Andrew Brown Cell Phone Number: 859-462-0965
 Person trained with current medication administration training CPR/FA/AED credential Andrew Brown & Amy Atkins

Destination Venue, Location and State: Von Braun Center, 700 Monroe St., Huntsville, AL 35801Trip Location Contact Person: Taylor Whisenant Phone Number: 256-431-1340# Teachers: 2 # Students: 14 # Chaperones: 3-5 Adult/Student Ratio: 1:3

Date(s) & Times		Cost	Transportation
Departure Date: <u>3/12/25</u>		Total Cost: \$ <u>26,077.64</u>	<input type="checkbox"/> District Bus/Van
Time: <u>6:00 AM</u> AM/PM		Funding Source: <u>PiBotics FRC Funds</u>	<input checked="" type="checkbox"/> Charter Bus: <u>Croswell #Depends on availability</u>
Return Date: <u>3/15/25</u>		Fee to be assessed to students: <u>\$ 0.00</u>	Approved Bid – Company Name
Time: <u>11:30 PM</u> AM/PM		<i>Attach Student Activity Cost Form 09.15 AP.23</i>	<input type="checkbox"/> Other: _____ <i>Attach a copy of Charter Bus Contract.</i>
Meals	At school prior to departure <input type="checkbox"/>	Student Packed <input type="checkbox"/>	Location where packed lunches will be consumed: _____
	Student Purchase Restaurant <input checked="" type="checkbox"/> (Name and location of each stop)	Name & Location: <u>See attached itinerary</u>	
Over Night	Date: <u>3/12/25 - 3/15-25</u>	Lodging: <u>Embassy Suites - Huntsville, AL</u>	
	Date: _____	Lodging: <u>* Hotel depends on availability</u>	

Trip Purpose and Core Content/Learning targets: Competing against other robotics team from around the world, driving & repairing the robot, editing programming, analyzing performance data of other robots, and marketing to other teams.

Special Student Circumstances: Review rosters for students who require handicapped accessibility, students not participating, other: _____

If any medication is listed on the parent permission form, someone must be identified and trained to administer medications. Consult with the school nurse to see who is permitted to give routine and/or emergency medications in the state(s) where the trip is planned. This form may not be submitted to Central Office for Board consideration until you have listed who will be administering all medications and the nurse has ensured that they are trained and authorized.

Name of trained administrator(s) of routine and emergency medications: Andrew BrownSchool Nurse Initials: AB for verification that medications administrator listed above received training.Due Date: 2/24/25 to turn in Roster and completed Parent Permission Slips for nurse's final review.

The following items have been completed or are in process. (Teacher/Sponsor/Coach must initial below)

- N/A I have viewed the field trip video for teachers/sponsors/coaches found on the district website
- AB I have attached an anticipated Trip Itinerary
- AB I have evaluated the trip site for potential hazards/special requirements
- AB I have an event-specific emergency action plan for the trip site and will distribute to all personnel attending the event in an official capacity.
- AB Funds have been secured for indigent students
- AB If needed, background checks for chaperone approval have been initiated
- AB Plans have been made for students who currently have medication orders on file at the school, to receive routing medications (trained employee for KY trips and states where approved, nurse, or parent attending):

Teacher/Sponsor/Coach Signature: [Signature] Date: 11/20/24

School-Related Student Trip Request Form**EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP)
FOR****ATHLETIC AND NONATHLETIC EVENT HELD OFF-CAMPUS**Destination/Venue Von Braun CenterVenue Address 700 Monroe St., Huntsville, AL 35801Person or email contacted at venue to discuss EAP Taylor WhisenantPosition/Title of person contacted Rocket City Event CoordinatorDate (s) of contact 11/12/24

Is there an Automatic External Defibrillator (AED) on site ☒ yes ☐ no? Is it regularly maintained? ☐ yes ☐ no? If yes, where is it located? Onsite, but no specific location was identified. As of 11/19/24, the event's EAP was in development. We will send when we receive it.

Does venue have an emergency response team (ERT) yes ☒ no?Process to request AED and/or ERT if needed at the scene Will be included in the EAP once it is completed and received.

Will a portable AED be taken from school on this trip ☒ yes ☐ no? If yes, who will be responsible for oversight and location of AED? Andrew Brown & Amy Atkins

Is any other assigned emergency equipment available on field trip? ☐ yes ☒ noIf so, list location of equipment There may be more listed in the EAP. We will send it when it is completed and received.

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP.

The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs.
- If possible, how to gain access.
- Steps that must be taken quickly to initiate the chain of survival.
 - Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing).
 - Call 911 using cell phone or other means of communication.
 - Begin Hands-Only CPR (push hard and fast in center of chest about 100 times/minute).
 - Retrieve and use the nearest AED.
 - Continuing supporting the victim until the local EMS arrives and takes over care; and
 - Direct EMS to the scene.

○ **APPROVAL SIGNATURES REQUIRED**○ **CHECK ALL BOXES BELOW THAT APPLY TO THIS TRIP REQUEST AND SECURE ALL REQUIRED SIGNATURES**

○ Principal:  Date: 11/20/24
 ○ ☒ Required for all trips

○ Superintendent/Designee: _____ Date: _____
 ○ ☒ Overnight Trips

○ Board of Education: _____ Meeting Date: _____

○ Submit forms to Superintendent/Designee for review and submission to the Board for approval.

○ ☒ Travel outside the Tri-State area of KY, OH, IN

○ ☒ Common Carrier contract including cost

○ ☒ Common Carrier Transportation Reason for using a Charter Bus/Plane: 6 hours one way; robot and equipment can also be transported on charter bus

○ *All field trip forms requiring Board approval must be completed and submitted by Deadline for next Board meeting.*

School-Related Student Trip Request Form**UPON APPROVAL, THIS FORM WILL BE RETURNED FOR FINAL PREPARATIONS**

- ☒ Provide a copy of this approved form to the bookkeeper and request Purchase Orders for all expenses
 - ☒ Make reservation with the venue
 - ☒ Make transportation arrangements
 - ☒ Send out completed principal approved Parent Permission Forms.
 - ☒ Confirm receipt of Parent Permission Forms & authenticate signatures. Send reminders, if needed.
 - ☒ Collect fees using the Multiple Receipt Form and turn funds into the Bookkeeper daily.
 - ☒ Confirm parents requesting to chaperone are on the approved list and begin assignment of chaperones to students. Parents of students who require emergency and/or routine medications should be invited to chaperone if they are on the approved list.
 - ☒ Consult with Cafeteria Manager on lunch arrangements, including number of students that will be out of the building if lunch is not provided through the Cafeteria.
 - ☒ Two weeks prior to the trip date, submit a student roster and all completed parent permission slips to the School Nurse for medications and/or specific adaptations approval. ☐ Confirm that personnel trained in medication administration, as needed and CPR/FA/AED will attend. Name of trained personnel Andrew Brown
 - ☒ Cost for nursing, if applicable, shall be arranged and paid by the school.
- School Nurse Signature: Deborah A. Thompson Date: 11-20-24

ON THE DAY OF THE TRIP

- | | |
|--|---|
| <input checked="" type="checkbox"/> Provide chaperone orientation (video, etc.) | <input checked="" type="checkbox"/> Post attendance prior to leaving |
| <input checked="" type="checkbox"/> Provide office with a list of chaperones & cell numbers | <input checked="" type="checkbox"/> Take student lunches (if applicable) |
| <input checked="" type="checkbox"/> Take student medications in original labeled bottle | <input checked="" type="checkbox"/> Take classroom emergency kit |
| <input checked="" type="checkbox"/> Take parent permission slips with you on the trip | <input checked="" type="checkbox"/> Take required payments |
| <input checked="" type="checkbox"/> Give office copies of all parent permission slips
(Retain for one (1) year) | <input checked="" type="checkbox"/> Provide copy of event specific EAP to all personnel
attending in an official capacity, including cell
numbers for all |

School-Related Student Trip Parent Permission Form

Student: _____ Trip Destination/Location: Von Braun Center
 School: Ignite Institute Class/Activity/Team: PiBotics FRC - Rocket City Regional Competition

Times Departure Date: <u>3/12/25</u> Time: <u>7:00 AM</u> AM/PM Return Date: <u>3/15/25</u> Time: <u>11:30 PM</u> AM/PM		Cost Student Fee: \$ <u>0</u> Adult Fee: \$ <u>0</u> Due Date: <u>NA</u>	Transportation District Bus/Van <input type="checkbox"/> Charter Bus <input checked="" type="checkbox"/> Other <input type="checkbox"/>
Meals	At school prior to departure <input type="checkbox"/>	Student Packed <input type="checkbox"/>	School Cafeteria Packed <input type="checkbox"/>
	Student Purchase Restaurant <input checked="" type="checkbox"/> (Name and location of each stop)	Name & Location: <u>See attached itenerary</u> Name & Location: _____	
Over Night	Date: <u>3/12/25 - 3/15/25</u>	Lodging: <u>Embassy Suites - Huntsville, AL</u>	
	Date: _____	Lodging: _____	


 Teacher/Sponsor/Coach Signature


 Principal Signature

My Child, _____ has permission to participate in this school trip.

All District and school policies shall be followed on this trip including chaperone assignments for both day and overnight trips, adult/student ratios, transportation guidelines, and behavior expectations/dress codes as outlined in the District's Code of Conduct and Expected Behavior. An event-specific emergency action plan has been developed to use in the event of a medical emergency, which may include the provision of a portable AED.

If the Board determines that world, national, or local events pose a potential threat to student safety, student trips shall be cancelled. In such a cancellation, the Board shall not authorize the use of District or building funds to reimburse any expenses not covered by cancellation insurance. All losses will be assumed by the parent/guardian. Please initial to indicate that you have read and understand the conditions of this clause. _____ (Parent/guardian Initials)

☐ If checked, it is recommended that the parent/guardian secure cancellation insurance. Information attached.

Should there develop a medical emergency that requires attention beyond first aid, every attempt will be made to contact the parent or guardian via the numbers listed below. However, in circumstances where timing is critical and/or communication problems develop, a student's life could be threatened by lack of medical attention. To avoid circumstances of this nature, please complete the following statement:

In cases of a medical emergency, as deemed by a physician and according to the procedures described above, I, as the parent/legal guardian, do hereby give my consent for the administration of medical treatment, including dental, medicines, inoculation, and/or surgical procedures deemed necessary to my child's health and safety.

Home Phone: _____ Address: _____

Mom (work): _____ (cell): _____ Dad (work): _____ (cell): _____

Family Doctor: _____ Phone: _____ Hospitalization Card #: _____

Name of Medical Insurance Carrier: _____

Allergies and/or reactions to drugs: _____

Medications currently taking: _____

Medications needed on this trip: _____

Who will be administering these medications? _____

Parent/Guardian Signature: _____

ALL MEDICATIONS NEEDED
ON THIS TRIP REQUIRE A
BOONE COUNTY
ADMINISTRATION OF
MEDICATION FORM TO BE
ON FILE AT THE SCHOOL.

Failure to provide complete, signed form will exclude the student from participating. Phone permission will not be accepted.
 Please review the student and chaperone tips on the back of this form with your student.

(OFFICE USE – NURSE INITIALS – For Review of Completed Parent Signed Permission Slip _____)

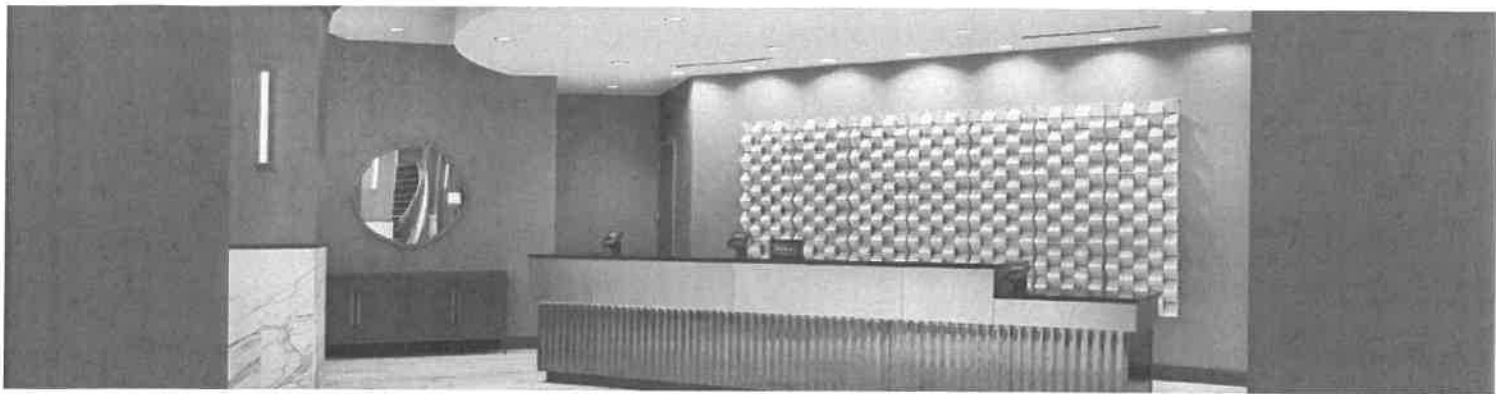
School-Related Student Trip Parent Permission Form**STUDENT TIPS:**

- Be focused on education during classroom trips
- Be focused on the team during activity/athletic trips
- Listen to adults
- Stay with your assigned group
- Use sidewalks
- Walk on left facing traffic
- Obey signals and use crosswalks
- No valuables/electronic devices
- Make sure cell phones are turned off – same as in school
- Use good manners, follow all rules, and respect all
- Stay seated and quiet on buses/vans

CHAPERONE TIPS:

- Allow time to have required background check prior to the trip as all chaperones must be pre-approved to participate in school trips
- No siblings may participate
- Follow the provided agenda
- Always stay with your assigned group
- Maintain a head count of your student group getting off and on buses/vans
- Spread out among students
- Medical and other issues are confidential
- No smoking
- Report on time to arranged meeting places
- Monitor restroom visits
- Follow all rules of the site
- Supervise students
- Observe traffic signals and use crosswalks
- Monitor bus/van behavior
- Set cell phone to vibrate and limit cell phone use to emergency only
- Be aware of hazards
- Support teacher by supporting assignments that need to be completed
- Review and keep copy of Emergency Action Plan

Review/Revised: 11/09/23



PROPOSAL PREPARED FOR: TIBOTICS MAR2025

Room Block						Tibotics Mar2025 03/11/2025 - 03/15/2025			
Room	Tue 03/11/2025		Wed 03/12/2025		Thu 03/13/2025		Fri 03/14/2025		Total
Standard King Suite									
Single	12	\$ 269.00	12	\$ 269.00	12	\$ 269.00	12	\$ 269.00	48
Executive Two Double Beds Suite									
Single	1	\$ 329.00	1	\$ 329.00	1	\$ 329.00	1	\$ 329.00	4
Daily Total	13		13		13		13		52

Room rates quoted are subject to occupancy tax which is currently, 13% but will be taxed at the rate in effect at the time of stay.

Estimated Costs	
Room Cost Overview	Total
Guestrooms	\$ 14,228.00
Tax (13%)	\$ 1,849.64
Total	\$ 16,077.64

Quotation Details

CROSWELL

Client ID Client Company Client Ref 1 Client Ref 2	Amy Atkins Ignite Institute	Quotation ID Movement ID	3112 4678	Passengers Distance	50 858.9
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First Pick-up Pick-up Date Single Journey Vehicle To Stay	Ignite Institute Wed 3/12/2025 Time 07:00 No Yes	Destination Arrival Date Leave Date Back Date	Huntsville, AL Wed 3/12/2025 Time Sat 3/15/2025 Time 18:30 Sun 3/16/2025 Time 02:30
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First Pick-up Instructions	Destination Instructions
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37 Atlantic Ave, Erlanger, KY 41018

Quantity	Seats	Vehicle Description	Unit Price	Price	Tax %	Tax	Total
1	50	Motorcoach	\$10,000.00	\$10,000.00	0	\$0.00	\$10,000.00
Movement Totals				\$10,000.00		\$0.00	\$10,000.00

Route	Further Requirements
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Driver will need a hotel room while in Huntsville. Group can book one (needs bus parking) or we can add \$200/night to the invoice and we will book one.

Departure from Huntsville, AL is approx 6:30pm, could be earlier or later
Do not need transportation while in Huntsville, AL.

We only have a 50 seat bus available for this trip.

2025 ROCKET CITY REGIONAL ITINERARY

Date

Food

Wednesday, March 12		Cost
6:30 AM	<ul style="list-style-type: none"> Load bus 	
7:00 AM	<ul style="list-style-type: none"> Depart Ignite Institute 	
10:30 AM	<ul style="list-style-type: none"> Pit Stop - Nashville <ul style="list-style-type: none"> Lunch @ McDonald's 2311 Brick Church Pike Road 	~\$10.00*
1:30 PM	<ul style="list-style-type: none"> Arrive at US Space & Rocket Center (Educational Experience) <ul style="list-style-type: none"> We will include this only if there are enough team funds available for all team members 	Purchased with team funds, if available
5:00 PM	<ul style="list-style-type: none"> Depart US Space & Rocket Center 	
5:30 PM	<ul style="list-style-type: none"> Arrive at Von Braun Center Unload pit equipment 	
6:00 PM	<ul style="list-style-type: none"> Arrive at Embassy Suites <ul style="list-style-type: none"> Dinner @ hotel - Domino's 401 Andrew Jackson Way NE Team meeting Student free time 	Purchased with team funds
9:00 PM	<ul style="list-style-type: none"> Students in rooms for the night 	

*Students will use their own spending money.

Thursday, March 13		Student Cost
6:45 AM - 7:30 AM	<ul style="list-style-type: none"> Complementary breakfast at hotel 	
7:30 AM	<ul style="list-style-type: none"> Depart Embassy Suites 	
8:00 AM - 9:00 AM	<ul style="list-style-type: none"> Arrive at Von Braun Center <ul style="list-style-type: none"> Pits open Robot inspection 	
9:00 AM - 11:00 AM	<ul style="list-style-type: none"> Drivers meeting Prep robot Field calibration 	
11:00 AM - 12:00 PM	<ul style="list-style-type: none"> Lunch 	~\$10.00** (boxed lunches from venue or students pack)
12:00 PM -	<ul style="list-style-type: none"> Practice Matches 	

6:30 PM		
6:30 PM - 7:00 PM	<ul style="list-style-type: none"> • Depart Von Braun Center for hotel 	
7:00 PM - 9:00 PM	<ul style="list-style-type: none"> • Arrive at Embassy Suites <ul style="list-style-type: none"> ◦ Dinner @ hotel - Taco Mama (taco bar) ◦ 301 Pelham Ave SW, Ste C8 • Team meeting • Student free time 	Purchased with team funds
9:00 PM	<ul style="list-style-type: none"> • Students in rooms for the night 	

**Students will use their own spending money.*

***Parents will purchase lunch online directly from the venue.*

Friday, March 14		Student Cost
6:45 AM - 7:30 AM	<ul style="list-style-type: none"> • Complementary breakfast at hotel 	
7:30 AM	<ul style="list-style-type: none"> • Depart Embassy Suites 	
8:00 AM	<ul style="list-style-type: none"> • Arrive at Von Braun Center 	
8:30 AM - 9:00 AM	<ul style="list-style-type: none"> • Opening Ceremonies 	
9:00 AM - 12:00 PM	<ul style="list-style-type: none"> • Qualification matches 	
12:00 PM - 1:00 PM	<ul style="list-style-type: none"> • Lunch 	~\$10.00** (boxed lunches from venue or students pack)
1:00 PM - 5:45 PM	<ul style="list-style-type: none"> • Qualification matches 	
5:45 PM - 6:00 PM	<ul style="list-style-type: none"> • Awards 	
6:00 PM - 6:30 PM	<ul style="list-style-type: none"> • Robot repairs/prep for next day • Depart Von Braun Center for hotel 	
7:00 PM - 9:00 PM	<ul style="list-style-type: none"> • Arrive at Embassy Suites <ul style="list-style-type: none"> ◦ Dinner @ hotel - Olive Garden (pasta bar) ◦ 3730 University Dr NW • Team meeting • Student free time 	Purchased with team funds
9:00 PM	<ul style="list-style-type: none"> • Students in rooms for the night 	

**Students will use their own spending money.*

***Parents will purchase lunch online directly from the venue.*

Saturday, March 15		Student Cost
6:30 AM - 7:15 AM	<ul style="list-style-type: none"> Complementary breakfast at hotel 	
7:15 AM - 7:30	<ul style="list-style-type: none"> Load luggage on bus Depart Embassy Suites 	
8:00 AM	<ul style="list-style-type: none"> Arrive at Von Braun Center 	
8:30 AM - 9:00 AM	<ul style="list-style-type: none"> Opening Ceremonies 	
9:00 AM - 12:15 PM	<ul style="list-style-type: none"> Qualification matches 	
12:15 PM - 12:30 PM	<ul style="list-style-type: none"> Alliance selection 	
12:30 PM - 1:30 PM	<ul style="list-style-type: none"> Lunch 	~\$10.00** (boxed lunches from venue or students pack)
1:30 PM - 4:30 PM	<ul style="list-style-type: none"> Final matches Clean up and organize after final match 	
4:30 PM - 5:30 PM	<ul style="list-style-type: none"> Awards Ceremony 	
5:30 PM - 6:00 PM	<ul style="list-style-type: none"> Load bus Depart Von Braun Center for Ignite 	
6:30 PM	<ul style="list-style-type: none"> Pit stop - Athens, AL <ul style="list-style-type: none"> Dinner @ Cracker Barrel 1212 Kelli Drive 	~\$20.00*
~1:00 AM	<ul style="list-style-type: none"> Arrive at Ignite Institute 	

*Students will use their own spending money.

**Parents will purchase lunch online directly from the venue.

CONTACT INFO:

HOTEL:

[Embassy Suites - Huntsville](#)

700 Monroe St. SW, Huntsville, AL 35801
636-532-3300

COMPETITION VENUE:

[Von Braun Center](#)

700 Monroe St. SW
Huntsville, AL 35801
256-533-1953

EDUCATIONAL EXPERIENCE:

[U.S. Space & Rocket Center](#)

One Tranquility Base
Huntsville, AL 35805
256-837-3400