

School-Related Student Day Trip and Overnight Trip Request Forms

THIS FORM MUST BE SUBMITTED TO THE PRINCIPAL TWO (2) WEEKS PRIOR TO THE TRIP IF BOARD APPROVAL IS REQUIRED, THE BOARD MUST RECEIVE THE FORM AT LEAST TWO(2) WEEKS IN ADVANCE OF TRIP.

INFORMATION

1. Sponsor's Name Amanda Ashton Club or Dep. Dance
2. Name of all chaperones Amanda Ashton, Andrew Ashton
3. Where will the group be going? Lexington, KY, Frankfort, KY
4. Purpose of the trip. State Comp
5. When is it to be held? Date 2/21-2/22 Departure Time 11:30 AM
Estimated Travel Time 3 hrs (one way)
Estimated Distance (Round Trip) 240
6. City Frankfort State KY
7. Place of overnight lodging (name, address & phone #) Drury Inn & Suites Louisville east
9501 Blairwood Rd Louisville 502-326-4170
8. Identify students by name (Use attached sheet if necessary) Jacey Hargrove, Alyssa Marsh, Kiara Ross, Taylor Cutteridge, Laila Vincent, Alexis Nichols
9. Cost to students 0 Cost to school organization 0 Cost to Board 3,000
10. Describe the relevance of the trip: educational, cultural, etc./educational activities State Competition
11. Other activities planned meals
12. How will this trip benefit your students? competition, teamwork
13. Type of transportation used van
14. Have trip permission slips been signed and are they in the possession of trip sponsor or leader?
Yes X No If NO, indicate why: closer to time

Amanda Ashton 1/21/25 [Signature] 1/21/25
Sponsor's Signature Date Principals Signature Date

Trip has been approved disapproved. Reason for disapproval

Signature of Superintendent/Designee Date Board Approval Date