

Field Trip Planning Form

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

School: Boone County High School Grade(s): 7-12 Class/Activity Group/Team: Soccer (Girls)
 Teacher/Sponsor/Coach: Lighthall, Ben Cell Phone Number: 513-607-0823
 Person trained with current medication administration training CPR/FA/AED credential Lighthall, Jeremy Bartley, Brooke Mullis

Destination Venue, Location and State: Rocky Top Sports World, 1870 Sports World Blvd, Gatlinburg, TN 37738

Trip Location Contact Person: Zach Schrandt Phone Number: 865-712-8532

Teachers: 4 # Students: 20 # Chaperones: 0 Adult/Student Ratio: 1/5

Date(s) & Times Departure Date: <u>9/5/25</u> Time: <u>3:00 p.m.</u> AM/PM Return Date: <u>9/7/25</u> Time: <u>8:00 p.m.</u> AM/PM		Cost Total Cost: \$ <u>4500</u> Funding Source: <u>Boone County Girls Soccer</u> Fee to be assessed to students: <u>\$0</u> <i>Attach Student Activity Cost Form 09.15 AP.23</i>	Transportation <input type="checkbox"/> District Bus/Van <input type="checkbox"/> Charter Bus: Approved Bid – Company Name <input checked="" type="checkbox"/> Other: <u>Parent transport</u> <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: _____ School Cafeteria Packed <input type="checkbox"/>		
	Student Purchase Restaurant <input checked="" type="checkbox"/> (Name and location of each stop)		
Date: <u>9/5/25</u> Date: <u>9/6/25</u>		Lodging: <u>Westgate Resorts River Terrace Resort & Convention Center</u> Lodging: <u>Westgate Resorts River Terrace Resort & Convention Center</u>	

Trip Purpose and Core Content/learning targets: Compete in the Smoky Mountain Cup, team bonding

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

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: Lighthall, Bartley, Mullis *Will provide training*

School Nurse Initials: KW for verification that medications administrator listed above received training:

Due Date: 8/15/25 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
☒ I have attached an anticipated Trip Itinerary
☒ I have evaluated the trip site for potential hazards/special requirements
☒ 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.
☒ Funds have been secured for indigent students
☒ If needed, background checks for chaperone approval have been initiated
☒ Plans have been made for students who currently have medication orders on file at the school, to receive routing medications (trained employees for KY trips and states where approved, nurse, or parent attending):

Teacher/Sponsor/Coach Signature: [Signature] Date: 7/22/25

School-Related Student Trip Request Form**EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP)****FOR****ATHLETIC AND NONATHLETIC EVENT HELD OFF-CAMPUS**Destination/Venue Rocky Top Sports WorldVenue Address 1870 Sports World Blvd, Gatlinburg, TN 37738Person or email contacted at venue to discuss EAP Zach SchrendtPosition/Title of person contacted Co-Founder & Director of High School CupDate (s) of contact 7/21/25Is there an Automatic External Defibrillator (AED) on site ☒ yes ☐ no? Is it regularly maintained? ☒ yes ☐ no? If yes, where is it located? Ben UghthallDoes venue have an emergency response team (ERT) yes ☒ no?Process to request AED and/or ERT if needed at the scene Contact one of trainers/paramedicsOne is at Field 1, another is mobile between fields 2 and 3 with another between fields 6 & 7.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? Ben UghthallIs any other assigned emergency equipment available on field trip? ☒ yes ☐ noIf so, list location of equipment Cold Immersion tub at Field 1, First Aid supplies with paramedics/ATCs

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: Stacey Black Date: 7/28/25
- ☒ 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: _____

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

Re: EAP for Smoky Mountain Cup

From Zach Schrandt <zach@highschoolcup.com>

Date Mon 7/21/2025 10:49 PM

To Melching, Lance <lance.melching@boone.kyschools.us>

Cc van@highschoolcup.com <van@highschoolcup.com>; Lighthall, Benjamin <benjamin.lighthall@boone.kyschools.us>; Ben Lighthall <ben@fusionfcny.com>

EXTERNAL MESSAGE

In the event of lightning delays or severe weather, all teams on Fields 1-3 will move into the main building at Rocky Top Sports World. Teams on Fields 5 will be moved into the Gatlinburg-Pittman locker rooms that overlook the field. Teams on Fields 6-7 can take shelter in the two City of Gatlinburg building located between those fields.

Thanks!

Zach

Zach Schrandt | Co Founder & Director



Smoky Mountain Soccer, LLC

P.O. Box 4096

Sevierville, TN 37864

zach@highschoolcup.com

Cell: 865-712-8532

www.highschoolcup.com

[@SmokyMtnCup](#)

[@SmokyMtnSoccer](#)

On Mon, Jul 21, 2025 at 10:19 PM Melching, Lance <lance.melching@boone.kyschools.us> wrote:

Thank you for this information, Zach. Are you also able to provide any info related to severe weather shelter?

LANCE MELCHING

Athletic Director

English & Journalism Teacher

Swim & Dive Team Coach
Boone County High School
lance.melching@boone.kyschools.us
p. (859) 282-5655 ext. 30518
f. (859) 282-5653
[Boone County Athletics Website](#)

From: Zach Schrandt <zach@highschoolcup.com>
Sent: Monday, July 21, 2025 6:09 PM
To: Melching, Lance <lance.melching@boone.kyschools.us>
Cc: van@highschoolcup.com <van@highschoolcup.com>; Lighthall, Benjamin <benjamin.lighthall@boone.kyschools.us>; Ben Lighthall <ben@fusionfcnkky.com>
Subject: Re: EAP for Smoky Mountain Cup

EXTERNAL MESSAGE

Lance,

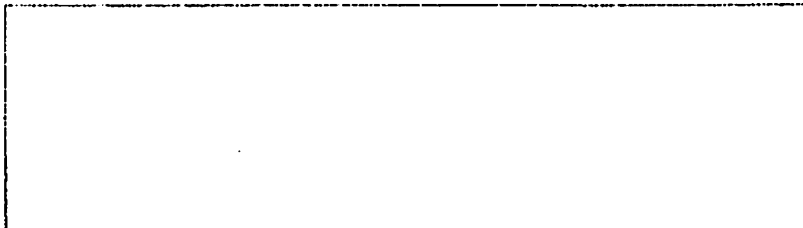
We will have three athletic trainers/paramedics on site during the event. One trainer is located at Field 1. Another is mobile and located between Fields 2-3. Finally, we sit another mobile trainer or paramedic between Fields 6-7. All 6 fields are visually covered by our staff, and/or the three paramedics/ATCs. Everyone also has radio communication to quickly relay any medical emergencies. In the event of a medical emergency that requires additional support beyond our on site personnel, we will immediately call 911. Fire/Rescue and EMS are located under 5 minutes from the complex.

One AED is located in the training room at Field 1. We have another located on Field 5. And another mobile between Fields 6-7 with the paramedic or ATC on those fields, so every field has one in very close proximity.

We also have a cold immersion tub on site. We sit this at Field 1 at the main training room.

Thanks,
Zach

Zach Schrandt | Co Founder & Director



Smoky Mountain Soccer, LLC
P.O. Box 4096
Sevierville, TN 37864

zach@highschoolcup.com