

Field Trip Planning Form

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

School: Larry A Ryle High School Grade(s): 7-12 Class/Activity Group/Team: Fastpitch Softball
 Teacher/Sponsor/Coach: Meier/Koberna Cell Phone Number: 859392435
 Person trained with current medication administration training CPR/FA/AED credential David Meier/Brandon Koberna

Destination Venue, Location and State: Fr. Ryan HS, St. Cecelia Academy - Nashville, TN
 Trip Location Contact Person: Ashlee Doyle/Brad Bishop Phone Number: 615-383-4200 ext 7342/615-298-4525
 # Teachers: 2 # Students: 20 # Chaperones: 2 Adult/Student Ratio: _____

<p>Date(s) & Times</p> <p>Departure Date: <u>4-7-26</u></p> <p>Time: <u>9:00am</u> AM/PM</p> <p>Return Date: <u>4-10-26</u></p> <p>Time: <u>10:00pm</u> AM/PM</p>	<p>Cost</p> <p>Total Cost: \$ <u>2,700</u></p> <p>Funding Source: _____ Softball Fundraising</p> <p>Fee to be assessed to students:</p> <p>\$ <u>0</u></p> <p><i>Attach Student Activity Cost Form 09.15 AP.23</i></p>	<p>Transportation</p> <p><input type="checkbox"/> District Bus/Van</p> <p><input type="checkbox"/> Charter Bus:</p> <p>Approved Bid – Company Name</p> <p><input checked="" type="checkbox"/> Other: <u>Private (Parents)</u></p> <p><i>Attach a copy of Charter Bus Contract.</i></p>
<p>Meals</p> <p><u>3</u></p>	<p>At school prior to departure <input type="checkbox"/> Student Packed <input type="checkbox"/> Location where packed lunches will be consumed: _____</p> <p>School Cafeteria Packed <input type="checkbox"/></p>	
<p>Over Night</p>	<p>Date: <u>4/7/26</u> Lodging: <u>Hyatt Place - Greenhills, TN</u></p> <p>Date: <u>4/10/26</u> Lodging: _____</p>	
<p>Student Purchase Restaurant <input type="checkbox"/> Name & Location: <u>Hampton Inn for breakfast</u> (Name and location of each stop) Name & Location: <u>Applebees for dinner</u></p>		

Trip Purpose and Core Content/learning targets: Athletic Trip----Varsity Fastpitch Softball

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: Brandon Koberna
 School Nurse Initials: SLW for verification that medications administrator listed above received training.
 Due Date: _____ 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)

- DLM N/A I have viewed the field trip video for teachers/sponsors/coaches found on the district website
- DLM Yes I have attached an anticipated Trip Itinerary
- DLM Yes I have evaluated the trip site for potential hazards/special requirements
- DLM HS does 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.
- DLM Yes Funds have been secured for indigent students
- DLM Yes If needed, background checks for chaperone approval have been initiated
- DLM _____ 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: David Meier/Brandon Koberna Date: 1/22/2026

School-Related Student Trip Request Form

**EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP)
FOR**

ATHLETIC AND NONATHLETIC EVENT HELD OFF-CAMPUS

Destination/Venue Nashville TN

Venue Address Fr. Ryan HS, St. Cecelia Academy

Person or email contacted at venue to discuss EAP Ashlee Doyle/Brad Bishop

Position/Title of person contacted Head Softball Coach/AD

Date (s) of contact January 2026

Is there an Automatic External Defibrillator (AED) on site yes no? Is it regularly maintained yes no? If yes, where is it located? Coach will carry with him to site

Does venue have an emergency response team (ERT) yes no?

Process to request AED and/or ERT if needed at the scene _____

AED to be brought with head softball coach _____

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? David Meier/Brandon Koberna

Is any other assigned emergency equipment available on field trip? yes no

If so, list location of equipment _____

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: [Signature] Date: 2/10/2026

○ 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.