Field Trip Planning Form

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

School: Conner High School Grade(s): 9-12 Class/Activity Group/Team: Cheer
Teacher/Sponsor/Coach: Kristy Ludeke Cell Phone Number: 859·609·1906
Person trained with current medication administration training CPR/FA/AED credential: Kristy Ludeke

Destination Venue, Location and State: Disney Property / ESPN - Orlando, FL
Trip Location Contact Person: Madison Toone Phone Number: 901·387-4313

Teachers: 3 # Students: 14 # Chaperones: 0 Adult/Student Ratio: 5:1

Date(s) & Times	Cost	Transportation
Departure Date: 2/3/27 Time: 6:00 AM/PM Return Date: 2/9/27 Time: 10:00 AM/PM	Total Cost: $ 20,000.00 Funding Source: Athletes/ parents **Fee to be assessed to students:** $ 1200.00 *Attach Student Activity Cost Form 09.15 AP.23*	☐ District Bus/Van ☐ Charter Bus: Approved Bid – Company Name ☒ Other: Airplane *Attach a copy of Charter Bus Contract.*

Meals	At school prior to departure ☐	Student Packed ☐ School Cafeteria Packed ☐	Location where packed lunches will be consumed: N/A
	Student Purchase Restaurant ☐ (Name and location of each stop)	Name & Location: N/A Name & Location: N/A	
Over Night	Date: 2/3/27	Lodging: Disney Property	
	Date: 2/9/27	Lodging: " "	

Trip Purpose and Core Content/learning targets: The biggest competition of the year - Everything we work for all year

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

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: Kristy Ludeke
School Nurse Initials: SW for verification that medications administrator listed above received training.
Due Date: TBD 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
KL I have attached an anticipated Trip Itinerary
KL I have evaluated the trip site for potential hazards/special requirements
KL 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.
KL Funds have been secured for indigent students
KL If needed, background checks for chaperone approval have been initiated
KL 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: Kristy Ludeke Date: 10/3/27

School-Related Student Trip Request Form

EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP) FOR ATHLETIC AND NONATHLETIC EVENT HELD OFF-CAMPUS

Destination/Venue Disney Property/ESPN Center

Venue Address Lake Buena Vista, FL 32830

Person or email contacted at venue to discuss EAP Madison Toone

Position/Title of person contacted Registration Specialist

Date (s) of contact 5/26/27

Is there an Automatic External Defibrillator (AED) on site ☒ yes ☐ no? Is it regularly maintained? ☒ yes ☐ no? If yes, where is it located? multiple locations throughout facility

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

Process to request AED and/or ERT if needed at the scene Call 911, locate AED & administer - Also taking portable AED.

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? Kristy Walker

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: _____ Date: 6/30/26

■ 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.

(Sample itinerary from last year)

CHS CHEER NATIONALS ITINERARY 2025

Wednesday, February 5

6:00 A – Arrive at CVG

6:15 A–4:30 P – Travel

4:30–6:30 P – Transport to Hotel

6:30–8:30 P – Check-in/Get ready for dinner

8:30 P – Team Dinner/Pictures at Resort

10:30 P – In Room

11:30 – Lights Out

Thursday, February 6

7:30-8:30 A – Wake-up/Get Ready

8:30–9:30 A – Breakfast

9:30 A–12:00 P – Practice on Football field

1:00 P – Leave for Magic Kingdom

8:30 P – Meet at castle to watch fireworks (depart for resort after fireworks)

Friday, February 7

8:45 AM – Wake-up

9:00-10:00 A – Breakfast

10-11:30 A – Practice

11:30 A-12:30 P – Lunch

12:30 P-3:30 P – Free time/RELAXATION at resort

3:30 P-5:30 P – Get ready for comp

5:45 P – Meet for buses (6:00 P departure)

6:30 P – Arrive at ESPN

9:32 P – Comp Time!! State Farm Field House

10:00 P – Depart ESPN

10:30 P – Pizza Delivered to rooms

11:00 – 11:30 P – Watch announcement for division on Varsity TV

Saturday, February 8

Follows Friday, February 7 schedule – Semi division is from 6:53 PM to 9:37 PM

ALTERNATE SCHEDULE

8:00-9:00 A– Wake-up/Get ready/Breakfast

9:00 A – Depart for Epcot

9:00 P – Return to resort

Sunday, February 9

Follows Friday & Saturday schedule – Final division is from 6:34 PM to 8:06 PM

ALTERNATE SCHEDULE

6:00-7:00 A – Wake-up/Get ready/Breakfast

7:00 A – Depart for Animal Kingdom

5:00 P – Return to Hotel

7:00 P – Depart for Celebration Party

Monday, February 10

8:30 A – Wake-up/Get Ready/Pack

10:00 A – Breakfast (Must have everything with you)

11:00 A – Depart Hotel for Airport

12:00-10:55 P – Travel

10:55 P – Arrive home!

Flight Info:

2/5/25

8:25-9:55 A CVG → BWI Flight WN560

11:05A-4:25 P BWI→MCO Flight WN3719 (layover with no plane departure in Hartford CT)

2/10/25

3:00-5:20 P MCO →BWI Flight WN2990

9:15-10:55 P BWI→CVG Flight WN4125