PROPOSAL FOR OVERNIGHT TRIPS

Type of Trip: 6BB easker who basketball Cump
Departure Date: June 29, 12 Return Date: July 2, 12
Proposer: Coach mill Position: Had Crack
Response Date Needed:Date Proposed: 3/15/12
School Days Missed (list dates):
Destination: Eusten Ohio - Sherodsville, Ohio
Lodging (contact numbers): On Site Cary Huggins 614 244 4100
Number of Coaches Attending: 3 (Brian Milly Trong Fortner, Paul Home Tackie Mohseninin, Number of Chaperones Attending: 2
Meals: On Site gravided
Transportation: Poverts drep + pick-up
Total Costs: #210 00
Cost per Student: 210. 00
Source of Funds: playars:
How will Funds be Collected and Deposited?: full direct to the Carof
Via Char or Visa
Provision made for Students Financially unable to pay?:
Weed to see Comp miller for help.

Attach Student Name & Contact Number Form (use additional page if needed)

Attach Coach & Chaperone Fo	rm ,	
Will have into Avad	clable before u	a leave on tamp
	· · ·	
Blingel		2/15/12
Signature of Requestor		Date
·		
Approved:		
Klim	•	3/16/12
Principal do M		Date 3/20/12
Superintendent		Date /
Board of Education		Date

STUDENT CONTACT INFORMATION FORM

List all Students attending event and Emergency Contact Number

NAME:	CONTACT NUMBER(S):
.i	
· · · · · · · · · · · · · · · · · · ·	
	-

COACH & CHAPERONE CONTACT INFORMATION FORM

List all Coaches & Chaperones attending event and Number(s) where they can be reached

•			NUMBER(S):	
made	available	as playar	s pay In camp	
			·	
	······································		·.	
<u> </u>			•	
.:				
	,			

RESPONSIBILITY CONTRACT FOR OVERNIGHT TRIPS

It is a pri	vilege for you to participate in the District-S	
this trip adhere t applicab rememb	is part of the District's Athletic Program, it to the Athletic Code of Conduct for overnig ile provisions of the general Code of er that from the time of departure to your onsibility of the District.	is imperative that you ht trips as well as the Conduct. You must
l agree t	o:	
A)	Refrain at all times from the consumption of and/or drugs unless said drugs are prescriand dispensed by school personnel or self-possession are properly authorized.	bed by a physician
В)	Sleep in my assigned room and not enterta opposite sex in my room, unless my room dand an adult chaperone is notified.	
C)	Keep my assigned chaperone advised of m times	y whereabouts at all
D)	Attend all mandatory activities and meal fu	nctions
E)	Adhere to all established curfews	· ·
F)	Conduct myself in such a manner as to brir family, my school, and my community	ng pride to myself, my
G)	Adhere to any established dress code	
H)	Comply, throughout the trip, with any and a directed to me and/or the group by a chape	
named parent/g home. professi opportu subjecte	elem arises that is serious enough in nature student's removal from the travel group, quardian) agree to bear any additional costs NOTE: This removal decision will be made onal staff member after a student has nity to respond to any allegations. The sed to discipline upon return home in accordicies.	we (the student and to return the student by the accompanying been provided the students may also be
Student	•	Date
Parent		Date