PROPOSAL FOR OVERNIGHT TRIPS

Junior High
Type of Trip: 6BB Easter & Mo Team Camp
Departure Date: July -9 / 12 Return Date: July - 11) 13
Proposer: Coach music Position: Head Coach
Response Date Needed:Date Proposed: 3/15/13
School Days Missed (list dates):
Destination: Ellstern Ohio Sperods VIIIE, 641
Lodging (contact numbers): Cump Site Joins
my Huggins 614 264 4105
Number of Coaches Attending: 3 Coach Mille, Fatne, Howe
Number of Chaperones Attending: 4 (4 Senior girls Stay With
Meals: privided
Transportation: Prents
Total Costs: 210.00
Cost per Student: 216.00
Source of Funds: player
How will Funds be Collected and Deposited?: fly direct beam?
Provision made for Students Financially unable to pay?:
Weed to see couch milk for help.

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

Attach Coach & Chaperone Form			
Dasa provided when we leave -	In Carry.		
Signature of Requestor	3/15/19 Date		
Approved:	3/16/12		
Principal Som Calhle	Date/		
Superintendent	Date		
Board of Education	Date		

RESPONSIBILITY CONTRACT FOR OVERNIGHT TRIPS

It is a pr to:	ivilege for you to participate in the	District-Sponsored Trip . Because	
this trip adhere applicat rememb	is part of the District's Athletic P to the Athletic Code of Conduct fole provisions of the general (er that from the time of departur onsibility of the District.	rogram, it is imperative that you or overnight trips as well as the Code of Conduct. You must	
l agree t	o:		
A)	Refrain at all times from the cons and/or drugs unless said drugs a and dispensed by school person possession are properly authorize	re prescribed by a physician nel or self-medication and/or	
B)	Sleep in my assigned room and no opposite sex in my room, unless and an adult chaperone is notified	my room door is fully opened,	
C)	Keep my assigned chaperone ad times	vised of my whereabouts at all	
D)	Attend all mandatory activities a	nd meal functions	
E)	Adhere to all established curfew	S	
F)	Conduct myself in such a manne family, my school, and my comm	-, -, -, -, -, -, -, -, -, -, -, -, -, -	
G)	Adhere to any established dress	code	
H)	Comply, throughout the trip, with any and all instructions directed to me and/or the group by a chaperone or staff member		
named parent/g home. profess opportusubject	plem arises that is serious enough student's removal from the traveus ardian) agree to bear any addit NOTE: This removal decision will ional staff member after a stanty to respond to any allegationed to discipline upon return horepolicies.	rel group, we (the student and ional costs to return the student i be made by the accompanying udent has been provided the ns. The students may also be	
Student		Date	
Parent		Date	

COACH & CHAPERONE CONTACT INFORMATION FORM

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

NAME:	NUMBER(S):
Brian Miller	475 6827
Tracy Fastre	6037124
Panel House	858 4058
Jacke Mohsenma	338 9065
Cara Cook	
Julyn Forther Senier Players	.:
Caralyon try Jako attend to	
Rules Destation bourth yourse of	aris!
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STUDENT CONTACT INFORMATION FORM

List all Students attending event and Emergency Contact Number

NAME: .	CONTACT NUMBER(S):
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