Field Trip Authorization Form
Name of Group/Team: CEHS Nordic and Alpine Shi tedm
Faculty/Staff member Making Request: SWAWY GOLNEY C
Date(s) of Proposed Trip: (4) (7) (7) # of School Days # Nights Away: 2
Destination: Presque Isle, Maine Distance (one-way): 300 Miles
Purpose/Benefit of Trip: Class B Stale Shi Meet
Transportation Arrangements: School from portalion
Students: 95 # Chaperones: 5 School Staff: 3 Parents/Other: 2 Arrangements for Mixed Gender Supervision: COCCUPS Male, Chapenes female
Arrangements for Mixed Gender Supervision: COCCUB Male, CHAPEND FCMALE
Cost Per Student: \$200 Kathy Barber 505 at Palat
Cost Per Student: 000 Sold Palak Description of any Fundraising: (N/15) 1/10 COCNERC CAR NORM, CAR MAIN, Do all members of the group/team have an opportunity to participate? XYes \(\text{No.} \)
If "no," describe circumstances:
For overnight trips All parent/other chaperones have attended volunteer training: XYes No
Date and time of pre-trip chaperone meeting: TW, Feb 12, 3:00 PM
For out-of-country trips Travel and cancellation insurance arrangements (attach copy of contract with insurance and cancellation provisions highlighted):
Approvals:
Principal or Athletic Administrator Superintendent School Board Date 2/5/ 2015 Date 3/5/15 Date
Authorization Authority: Principal/AA: in-state day trips; Superintendent: out-of-state trips w/n 125 miles, in-state trips requiring one-night stay; School Board: out-of-state trips beyond 125 miles, trips requiring 2 or more overnights; trips costing \$500 or more per student