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| --- | --- |
| **Trip/Team** |  |
| **Trip Dates** |  |
| **Hotel** |  |
| **Address (City & State)** |  |
| **Board Approval Date** |  |
| **Administrator(s) Names****(With cell contact)** |  |
| **Coaches Names****(With cell contact)** |  |
| **Number of Students** |  |
| **Number of Chaperones** |  |
| **Detailed Itinerary\***  | **Date:** | **Time:** | **Activity:** |
|  |  |  |
| **Hotel Room Check Information** | **Time students are required to be in rooms** |  |
| **Room checks done by** |  |
| **Time lights out** |  |
| **CUSD Student Forms on File (Board Policy 3541.1 & 6153): YES NO** **(Please circle one)** |
| **COVID Contingency Plan:** |
| **Date reviewed by AD and DP or Principal or Area Supt:** |
| \* Account for each day, each event, each activity, and each hour of trip.  |