



BERNE-KNOX-WESTERLO CSD FIELD TRIP REQUEST



Please return to the Administrative Assistant in the main office of your school

SPORT AND ACTIVITY-FIELD TRIP ORDER FORM

MUST BE SUBMITTED A MINIMUM OF TEN (10) SCHOOL DAYS IN ADVANCE

Booking Information:

Day/Date of Trip: _____ Group/Grade Level: _____

Requested By: _____

Please check the appropriate school Elementary Secondary Sport

Classroom phone extension: _____ Cell phone number: _____

E-mail address: _____

School Bus Information: Please list all destinations and stops including restaurants, etc., planned for your trip.

Destination Name: _____

Destination Address: _____

Departure time from BKW: _____ Departure time from Destination: _____

Scheduled time to arrive back at BKW: _____

Of Students: _____ # of Adults: _____ #of wheelchairs: _____

Food Service Information:

Will the trip return in time for the designated school lunch period?

Check for Yes Check for No

Will school bagged lunches be needed for the trip? Yes No

Names of faculty and staff accompanying the trip; please check if a sub is needed:

- 1.
- 2.
- 3.
- 4.

Administrator Approval: _____

Business Office Approval: _____

Transportation Approval: _____