

2004 (Athletics) Extended-Overnight Athletic Request Form

**WALLED LAKE CONSOLIDATED SCHOOL DISTRICT
EXTENDED/OVERNIGHT ATHLETIC REQUEST FORM**

WL School Bus Charter Bus Personal Vehicle Foot
 (Account # Required-see below) (Attach Insurance Copy) (Consent Forms kept w/school) (No Transportation)

**Students driving a personal vehicle, the trip distance cannot exceed 35 miles, 2004-AR Athletic Private Transportation Authorization form is required.*

School _____ Grade _____ Date(s) of Event _____

Coach _____ Sport _____

Destination _____

Time of Departure from School _____ Time of Return to School _____

<u>Name(s) of Staff Members Attending</u>		Total Participation _____
1. _____	6. _____	# of Athletes _____
2. _____	7. _____	# of Staff _____
3. _____	8. _____	# of Chaperones _____
4. _____	9. _____	Type of Special Equipment _____
5. _____	10. _____	_____

- Have you made necessary arrangements with authorities at your destination? Yes Does Not Apply
- Have you notified cafeteria and itinerant staff of the date of your trip? Yes Does Not Apply
- Indicate account number for WL transportation billing: _____
- Substitute arrangements have been made where necessary. Yes Does Not Apply

LODGING INFORMATION

Date _____ Facility _____

Address _____ Phone _____

Date _____ Facility _____

Address _____ Phone _____

COACH RESPONSIBILITIES FOR EXTENDED/OVERNIGHT ATHLETIC EVENT

1. Submit this form to principal and discuss payment method him/her a minimum of four weeks in advance of start date of trip.
2. Send [2004 AR Extended Athletic Parent Notice/Permission & Medical Consent Form](#) to parent.
3. Discuss with each chaperone his/her responsibility and assign students to chaperones.
4. Discuss with all students your rules and their responsibilities.

Coach Signature _____ Date _____ Principal Signature _____ Date _____

Cabinet Member Approval _____ Date _____

<u>FOR TRANSPORTATION USE ONLY</u>	
<i>Field Trip Salary Rates</i>	
<i>Weekday \$33.00/hour • Saturday \$50.00/hour • Sunday & Holiday \$66.00/hour</i>	
Your account(s) have been charged as follows:	
Field Trip Salary (_____ hours _____ minutes @ _____ /hour)	\$ _____
Field Trip Mileage (_____ miles @ \$2.00/mile/per bus)	\$ _____
TOTAL \$ _____	
Journal Entry #: _____	Logged on: _____