



## LOS ALAMITOS UNIFIED SCHOOL DISTRICT FIELD TRIP CHECK REQUEST

School Site: \_\_\_\_\_

Field Trip to: \_\_\_\_\_ Field Trip Date: \_\_\_\_\_

Teacher/Grade: \_\_\_\_\_

Number of Students: \_\_\_\_\_ Amount/Student: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Check Amount: \$ \_\_\_\_\_ Date check needed: \_\_\_\_\_

Account Number: \_\_\_\_\_

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

**PLEASE REQUEST YOUR CHECK TWO WEEKS IN ADVANCE AND  
RETURN FORM TO ERIKA GUERRERO**