

GLEN RIDGE PUBLIC SCHOOLS

FIELD TRIP REQUEST FORM

Today's Date _____ School: GRHS Grade(s): 8-12
 Organization: Robotics Club Teacher(s): C. Drozdowski
A. Shohem

Field Trip Description: VEX Robotics Competition
 Destination: VRC Spin Up Saturday Skirmish 462 Millburn Ave
Millburn, NJ

Anticipated number of students participating: 10 Is this an overnight trip? Yes ☐ No ☒

Date(s) of trip: Feb 12 (Sat.) Departure time: _____ Return time: _____

Transportation: ☐ Walking ☒ Cars ☐ Bus ☐ Rental Vehicle ☐ None Needed

Bus Company: _____ Seat belts: ☐ Yes ☐ No

Rental Company: _____

No. of Vehicles to be Rented: _____ Type of Vehicle(s): _____

Number of Chaperones: Teachers 2 Parents _____ Other _____

Name of AED Trained Chaperone: A. Shohem

EDUCATIONAL INFORMATION:

What subject is the trip associated with? Robotics

Please list curricular objectives and Core Curriculum Content Standards that will be met through this experience:

| OBJECTIVE | CCCS |
|--|-------------|
| • Use research to and design and create a product or system that addresses a problem and make modifications based on input from potential customers | 8.2.12.ED.1 |
| • Evaluate the effectiveness of a product or system based on factors that are related to requirements specifications and constraints | 8.2.12.ED.5 |
| • Refine a solution that meets users' needs by incorporating feedback from team members & users. | 8.1.8.AP.6 |
| • Examine a malfunctioning tool, product or system and propose solutions to the problem. | 8.2.8.NT.1 |

Additional information/description can be attached.

TRIP COST:

Transportation \$ 0 (Note: Tips are not permitted under DOE regulations)
Registration Fees \$ 75
Food \$ 0 (Students will bring bag lunch ☒ Yes ☐ No)
Chaperone Fees \$ 0
Cost to District \$ _____ (Substitutes, stipends, etc.)
Total \$ _____ Student Cost \$ _____
Do students need spending money? ☒ No ☐ Yes If yes, how much? \$ _____

NECESSARY APPROVAL SIGNATURES:

(All signatures needed prior to Board of Education approval)

Field Trip Organizer: Courtney D. [Signature] Date: _____

Building Administrator's Signature: [Signature] Date: 1/6/23

Superintendent's Signature: [Signature] Date: _____

VRC Spin Up SATURDAY Skirmish

Date

11-Feb-2023 - 12-Feb-2023

Event Code

RE-VRC-22-9909

Program

VEX Robotics Competition

Event Type

Tournament

Event Format

In-Person

Capacity

32

Spots Open

50%+

Event Region

New Jersey

Early-Bird Registration Opens

12-Oct-2022 12:00 EDT

Standard Registration Opens

31-Dec-2022 12:00 EST

Registration Deadline

1-Feb-2023 12:11 EST

Price

\$75.00

100% of total capacity is reserved for New Jersey.

24 remaining spots are reserved for New Jersey.

Login to Register

General Info

Agenda

Volunteer

Emergency/Bad Weather Policy

Refund Policy

Health and Safety Policies

Webcast

Judging Format

Documents

Teams

Waitlist

Results

Awards

General Info

Welcome to SPIN UP SATURDAY Skirmish Millburn high school

SPIN UP SATURDAY Skirmish Millburn high school

Our intention of this style of event is to give all NJ teams to compete on one of the event days. **Teams will only compete at one of the events not both.**

If you have any questions please feel free to reach out to Josh at Josh@robotrevolution.net.

Grade Level: All

Skills Challenge Offered: Yes

Judging Format: All In-Person Judging

Eligible Teams:

Event Dates & Locations

Date: 11-Feb-2023 - 12-Feb-2023

Venue/Location:

Millburn High School

462 Millburn Avenue

Millburn, New Jersey 07041
United States

Contact Information

You must login to contact this Event Partner

Robotics Education & Competition Foundation
1519 INTERSTATE HIGHWAY 30 W
Greenville, TX 75402
Email: support@robotevents.com

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GLEN RIDGE PUBLIC SCHOOLS

FIELD TRIP REQUEST FORM

Today's Date 1/6/23 School: Glen Ridge H.S. Grade(s): 9th
 Organization: 9th grade Teacher(s): Hackmeyer, Belaschak,
Ganatra, D'Andrea

Field Trip Description: Students will attend a production of Romeo and Juliet
 Destination: Castle Shakespeare Repertory Company

Anticipated number of students participating: 150 Is this an overnight trip? Yes ☒ No

Date(s) of trip: 4/26/23 Departure time: 8:30 am Return time: 1:30 pm

Transportation: Walking Cars ☒ Bus Rental Vehicle None Needed

Bus Company: Vanderhoof Seat belts: ☒ Yes No

Rental Company: _____

No. of Vehicles to be Rented: 3 Type of Vehicle(s): Bus

Number of Chaperones: Teachers 8 Parents _____ Other _____

Name of AED Trained Chaperone: Jody Hackmeyer

EDUCATIONAL INFORMATION:

What subject is the trip associated with? English

Please list curricular objectives and Core Curriculum Content Standards that will be met through this experience:

| OBJECTIVE | CCCS |
|---|---------|
| • Integrate information presented in different media or formats to develop a coherent understanding | SL 9-10 |
| • Apply knowledge of language to understand how language functions in different contexts and to comprehend more fully when reading or listening | SL 3 |
| • To see and enjoy a play, a live performance of a play studied in class | RL 10 |
| • | |




Additional information/description can be attached.

TRIP COST:

| | | |
|---|-------------------|---|
| Transportation | \$ <u>2475.00</u> | (Note: Tips are not permitted under DOE regulations) |
| Registration Fees | \$ <u>2900.00</u> | |
| Food | \$ <u>—</u> | (Students will bring bag lunch <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) |
| Chaperone Fees | \$ <u>—</u> | |
| Cost to District | \$ <u>—</u> | (Substitutes, stipends, etc.) |
| Total | \$ <u>5,375</u> | Student Cost \$ <u>36.00</u> |
| Do students need spending money? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, how much? \$ _____ | | |

NECESSARY APPROVAL SIGNATURES:

(All signatures needed prior to Board of Education approval)

| | | | |
|-------------------------------------|---|-------|----------------|
| Field Trip Organizer: | <u></u> | Date: | <u>1/6/23</u> |
| Building Administrator's Signature: | <u></u> | Date: | <u>1/19/23</u> |
| Superintendent's Signature: | <u></u> | Date: | <u>1/20/23</u> |



Ed Vanderhoof (Quotes) <quotes@evanderhoof.com>

New submission from Quotes Form

1 message

Charter Bus, West Orange NJ | E. Vanderhoof & Sons Website Quote Form <no-reply@evanderhoof.com>
 Reply-To: Developer2018Team@gmail.com
 To: quotes@evanderhoof.com

Thu, Jan 5, 2023 at 9:22 AM

| | |
|---|--------------------------------------|
| Ordered By: | Jody Hackmeyer |
| Phone | 9733423391 |
| Billing Info | Glen Ridge High School |
| Billing Address | 200 Ridgewood Ave |
| Zip | 07028 |
| Contact Person Day of Trip | Jody Hackmeyer |
| Phone | 973-342-3391 |
| Departure Date | 04/26/2023 |
| Departure Date | 8:00 AM |
| Departing From Address | 200 Ridgewood Avenue |
| Departing From City/State | New Jersey |
| Departing From Zip | 07028 mt olive, NJ |
| Vehicle Size | 55 |
| No. of Passengers | 150 |
| Destination | Castle Shakespeare Repertory Company |
| Destination Address | 23 Lake Shore Road |
| Destination Zip* | 07828 |
| Destination City/State | New Jersey |
| Return Date | 04/26/2023 |
| Return Time | 1:00 PM |
| Additional Information | |
| You have read and agreed to the terms and conditions | I agree to the terms and conditions |
| Contact Email | jhackmeyer@glenridge.org |

\$ 825 + gratuity



Castle Shakespeare Repertory Company
at Pax Amicus Castle Theatre
23 Lake Shore Road Budd Lake, NJ 07828
(973) 691-2100 ♦ www.paxamicus.com ♦ Fax (973) 691-5783

| | |
|--------------------|--------|
| Date of agreement: | 1/3/23 |
|--------------------|--------|

Castle Shakespeare Repertory Company

| | | | |
|---------------|---------------------------|---------------------------------|---------------------------|
| Will Present: | ROMEO AND JULIET | | |
| On: | (day) WEDNESDAY | (date) APRIL 26, 2023 | (time) 10:00 AM |

DUE TO THE TIGHT SCHEDULES OF ALL INVOLVED, PLEASE MAKE EVERY EFFORT TO ARRIVE NO LATER THAN 9:45 AM

| | | | | | |
|-------------------------|------------|-----------------|----------------|-------------------|------------------|
| Total number of seats*: | 145 | Price per seat: | \$20.00 | Total amount due: | \$2900.00 |
|-------------------------|------------|-----------------|----------------|-------------------|------------------|

**Total number of seats MUST include all teachers/chaperones/nurses in order to provide enough seating for all parties.*

| | | | |
|--------------------------|--|--------|---------------------------------|
| Your Representative: | JODY HACKMEYER | | |
| Sponsoring Organization: | GLEN RIDGE HIGH SCHOOL | | |
| Address: | 200 RIDGEWOOD AVENUE GLEN RIDGE NJ 07028 NJ 07438 | | |
| Day phone: | 973-429-8300 | Email: | jhackmeyer@glenridge.org |

It is agreed: That Pax Amicus Castle Theatre will assume responsibility for the above production, its performance, cast, sets, properties, costumes, etc. AND The SPONSORING ORGANIZATION will assume responsibility for sale of tickets, transportation, and audience decorum. It is the policy of PAX AMICUS THEATRE to begin promptly. Please notify your audience members of curtain time. In case of inclement weather, a substitute date within the same season will be determined mutually convenient to both parties.

FINANCIAL AGREEMENT

| | |
|---|----------------|
| A 25% NON-REFUNDABLE deposit of: | \$725.00 |
| to be returned with this contract on or before: | March 31, 2023 |
| Balance of: | \$2175.00 |
| due on or before: | May 15, 2023 |

Please sign this contract and return with your check, as per above agreement.

Make checks payable to:

Castle Shakespeare Repertory Theatre

And mail to:

23 Lake Shore Road, Budd Lake, NJ 07828

Representative of Castle Shakespeare:

Signature *Karen Boyer* Title Office Manager Date 1/3/23

Representative of SPONSORING ORGANIZATION:

Signature *Jody Hackmeyer* Title English Teacher Date 1/4/23