


NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION
(To be completed by Teacher/Advisor)

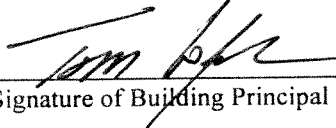
School STANWOOD HIGH SCHOOL Today's Date 10/3/19
Individuals/Group Involved GIRLS SWIM Number of Students TBD
Activity STATE TOURNAMENT
Destination FEDERAL WAY, WA
Departure Date 11/14/19 Return Date 11/16/19
Accommodations: LA QUINTA
Source of Revenue: ATHLETIC GENERAL
Fundraising Activities _____
Individual Student Cost 0 Total Group Cost \$2584⁰⁰
Insurance (special coverages) _____
Purpose of Trip (include educational value) TO PARTICIPATE IN THE STATE GIRLS SWIM TOURNAMENT.

Has this trip been previously taken? YES If yes, when? LAST YEAR

List of chaperones and students **MUST** be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

- _____ 1. Additional information needed: _____
- _____ 2. Insurance coverage to be arranged through the insurance office.
- _____ 3. Parent permission and medical authorization forms go to principal.
- _____ 4. All district employees need to submit a travel request form.
- _____ 5. Notify school nurse.


Signature of Initiator


Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 11-5-19
 Approved

Superintendent or Designee Signature Date