

Field Trip Estimate Form

Today's Date: _____

Trip Date: _____

Destination: _____

School: _____

Grade: _____

Teacher: _____

Students: _____

Adults: _____

Departure time: _____

Return arrival time at school: _____

Contact E-mail: _____

To be completed by the carrier

LUHSD can provide transportation for this trip for approximately \$: _____

Quote is for # of buses: _____ @ \$ _____ Per Bus

Signed: _____ Date: _____

Note for ECCSTD (Liberty Transportation):

This is an estimate only. Final price is determined by actual time and miles and may include incidentals such as bridge toll, parking and driver meals.

Reservation is not complete until Field Trip Transportation Form / Bus Request Form and Purchase Order are received at the Transportation Office.