

CURRICULAR AND EXTRA-CURRICULAR TRIPS
5 Days or more in duration

Use this form for all in-district or in-province field trips of **five or more calendar days in duration**. Submit it to your Assistant Superintendent **Ten (10) days before the event**. Attach a copy of contracts entered into for transportation, facilities, etc., and other pertinent information, such as itinerary, letters to parents etc.

School: _____ Sponsor Teacher: _____

Description of Activity: _____

Location: _____

Date: _____ To: _____

Age of Students: _____ Number of Students: _____

Method of Transportation: _____ Type of Sleeping Accommodation: _____

Total Number of Supervisors: _____ (Parents _____ Teachers _____ Other Volunteers _____)

Total Budget: _____ Cost to Each Student: _____

Purpose of Trip: _____

Supervision Details: _____

First Aid (Specify how first aid services will be accessed if required.)

Date Teacher Signature

For Principals,

Your signature on this form confirms that you have assessed risks to students associated with this activity, have reviewed safety precautions with the teacher and will receive written permission from parents for their children to participate.

- | | |
|---|---|
| <input type="checkbox"/> Itinerary for trip | <input type="checkbox"/> Sport injury insurance forms, if required |
| <input type="checkbox"/> Letter(s) for parents | <input type="checkbox"/> First aid plan |
| <input type="checkbox"/> Hardship clause | <input type="checkbox"/> Emergency & communication plan in place |
| <input type="checkbox"/> Medical forms for each student | <input type="checkbox"/> List of students & parent contact no# left at school |

Date Principal's Signature

Approved Not Approved

Date Superintendent or designates' Signature

Please keep a copy for your records and send original for signature(s).