



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

School SHS Today's Date 4/10/23
 Individuals/Group Involved Boys Soccer Number of Students 22
 Activity WIAA State Tournament
 Destination Puyallup, WA
 Departure Date 5/25/23 Return Date 5/27/23
 Accommodations: Pending qualification
 Source of Revenue: Athletic, gen.
 Fundraising Activities n/a
 Individual Student Cost 0 Total Group Cost 4,629
 How was this activity/trip available to any interested and/or eligible student(s) Tryouts
 How was this trip promoted to all interested/eligible students? website, smore etc.
 Will any student(s) be excluded from this trip due to the inability to pay? no
 Insurance (special coverages) n/a
 Purpose of Trip (include the educational value) Boys Soccer team to compete @ WIAA State Competition.

Has this trip been previously taken? _____ If yes, when? _____

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 the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

[Signature] Signature of Initiator [Signature] Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 5/2
Approved

Superintendent or Designee Signature

Date