



Prospectus – Long Distance/ Overnight Excursion Form

School _____ Destination _____

Group _____

Purpose of trip _____

Departure date & time _____ Return date & arrival time _____

Number of school days to be missed _____ Number of students traveling _____

Name(s) of certificated and/or coaching staff traveling with group _____

Name(s) of parent/guardian chaperone(s)/volunteer(s) traveling with group _____

Arrangements for meals and lodging _____

Arrangements for mode of transportation _____

Estimated costs To each student \$ _____ To ASB \$ _____
 To district \$ _____ To Building \$ _____
 Other _____ Acct Code _____

Proposed arrangements for financing trip _____

Plan for students with insufficient funds _____

Additional comments _____

Submitted by _____
Signature of Teacher/Coach/Advisor Date signed

Principal _____ Executive Director _____
Signature of Principal/designee Signature