

OVERNIGHT FIELD TRIP CHECK LIST

Please attach all documents listed to the Overnight Field Trip form.

Principals and Supervisors: Please do not sign the form or forward until all items are attached to the form and checked off on this list.

All overnight field trips are approved through a two-step process at the Central Office:

- 1) Administration
- 2) Board of Education at a Board Meeting

Overnight Field trips must be received in the Board Office 90 days prior to the Field Trip Date.

- _____ 1. **Nurse's signature** and all other school-level signatures.
- _____ 2. **Expense sheet** showing total cost of trip and total cost per student. Show the cost to the District and/or any other source of funding such as fundraising information.
- _____ 3. **Detailed Itinerary**
- _____ 4. **Accommodation/s:** Name, address and telephone number of accommodations.
- _____ 5. **Accommodation** – Contract*, current Insurance Certification and Indemnification/Hold Harmless Agreement
- _____ 6. **Wayne School Bus** – clearly check this box on form.
- _____ 7. **Commercial Bus Company (other than Wayne School Bus)** – Clearly check this box on the Form. Provide the name, address and telephone number, Contract*, current Insurance Certification and Indemnification/Hold Harmless Agreement with the company.
- _____ 8. **Other transportation:** Complete flight information if using an airline.
- _____ 9. **Additional transportation:** All information on other excursions, such as a boat trip, special charter bus, etc. – name of company and all insurances as required in #7 above.
- _____ 10. **Competitions, tournaments, etc.:** The current Insurance Certification of the hosting organization, and competition/tournament location information if different than the accommodation.
- _____ 11. **Copies of all communications to parents.**
- _____ 12. **Sample Permission Slips/Package** – with the trip information filled out on all pages:
 - Permission Slip – “Field Trip Information/Rules”
 - Permission Slip – “Dear Parents/Guardians”
 - Overnight Field Trip Medication Procedures form
 - Emergency Authorization
 - Release, Hold Harmless and Indemnification Agreement
- _____ 13. **Advisor:** Name, daytime telephone number, and District Location of the Advisor organizing the Overnight Field Trip, address of Advisor if not a District employee.
- _____ 14. **List of Chaperones** – Names, position in district, or indicate other relationship such as “Parent”.
- _____ 15. ***Contract/s** – Do not sign contracts, they are signed by the B.A. Forward them with the trip pack.

Principal: _____

Dated: _____