

FIELD TRIP REQUEST FORM

☐ Day Trip, school day ☐ Overnight Trip, ___ Nights
☐ Day Trip, nonschool day ☒ Out-of-State Trip, 6 Nights
 Date(s) of Trip: 4/3-4/9 Alternate(s): _____

Destination: NEW YORK

Intermediate destinations, departure, and arrival times, if overnight or out-of-state

SFO depart 4/3/19 @ 9:35am → NJNY arrive @ 6:00pm
NJNY depart 4/9/19 @ 5:30pm → SFO arrive @ 9:10pm

Date of Request: 1/17/19 # days prior to trip: 77

Sponsoring Group: PHOTOGRAPHY School: TAM

Number of Students Participating: 22 Number of Chaperones 3

Purpose of Trip: ART TOUR of NYC + surrounding areas.

Attach documentation for scheduled events, programs

Swimming included: Yes ☐ No ☒ If yes, complete E(2) 6153

Estimated cost of trip: 0 Cost per student: \$1650

Charged to: ☐ School M/E ☐ Student Body ☐ Athletics ☐ Organization budget
☐ Fund-Raising ☒ Student/Parent Contribution Other: _____

Mode of Transportation: ☐ Contract bus ☐ Employee car
☐ Volunteer car ☐ Student driven car ☒ Other: plane
 (complete Driver Certification Form E(1) 3541.1)

Insurance Coverage Needed:

☐ Day Trip: Student insurance for students not covered by their own or parent's insurance, insurance available through the District
☒ Overnight or Out-of-State Trip:
 Extended Short-Term Group Coverage, available through the District
 (See 5142 - Insurance)

Staff Member in Charge, Print Name: MARY KRAWCZYK
 I have read and will abide by Board policies and regulations pertaining to field trips.
 (cf. 6153 - District-Sponsored Trips)
 (cf. 5142 - Transportation for School-Related Trips)
 (cf. 5541.1 - Insurance)

Signature _____ Date 1/22/19
 Principal - Signature J.C. [Signature]

TAMALPAIS UNION HIGH SCHOOL DISTRICT
 Larkspur, California