

EVIDENCE OF PLANNING FOR OVERNIGHT TRAVEL CHECKLIST

Group: _____ Advisor: _____

Destination: _____ Dates: _____

Chaperones: _____

- Overnight travel request submitted 3 months prior to travel
- Parent Approval form filled out and submitted
- Transportation request completed
- Itinerary submitted and distributed to parents
- Medical Release and Code of Conduct completed (for students not on register my athlete)
- Disclosure and Consent form **already on register my athlete?**