

## ACTIVITY APPROVAL FORM

### Instructions:

1. Request must be submitted at least one week in advance
2. A separate request form must be filled out for each activity
3. Submit activity form to Athletic Director first
4. Copy then goes to Transportation Director, Building Principal and Superintendent for approval
5. Athletic and Quiz Bowl trips have priority

Name of Activity: \_\_\_\_\_

Date of Activity: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Class Grade or Club: \_\_\_\_\_ # of Students \_\_\_\_\_ # of Adults \_\_\_\_\_

Teacher in Charge: \_\_\_\_\_

Facilities Required: \_\_\_\_\_ Facility Location Needed: \_\_\_\_\_

Special instructions and directions (Example-Set up 50 chairs and 10 tables)

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Time or Period of day building needs to be open: \_\_\_\_\_ Time Closed: \_\_\_\_\_

Time event actually starts: \_\_\_\_\_

Transportation Needed: \_\_\_\_\_

### Agenda:

Trip Driver: \_\_\_\_\_ Bus # to be Taken: \_\_\_\_\_

Time of Departure: \_\_\_\_\_ Time of Return: \_\_\_\_\_

Sub Teacher Needed: \_\_\_\_\_

Sub Bus Driver Needed: \_\_\_\_\_ Bus # to be Taken: \_\_\_\_\_

Sub Driver's Name: \_\_\_\_\_

Notification to \_\_\_\_\_ Person Submitting Request \_\_\_\_\_

Cafeteria \_\_\_\_\_ Athletic Director \_\_\_\_\_

Food Director initials \_\_\_\_\_ Dir. of Op. \Transportation \_\_\_\_\_

Check Needed \_\_\_\_\_ Building Principal \_\_\_\_\_

Date needed by: \_\_\_\_\_ Superintendent \_\_\_\_\_

Please attach Business name,

Address, Phone and Fax#

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