

<b>Housing</b>	Name of motel(s)/hotel(s) on trip: _____ Phone number(s) of motel(s)/hotel(s): _____
<b>Chaperones</b>	Name of Administrator/Appointee on trip: _____  Chaperones: (Must be 10-fingerprinted approved and must be a ratio of no more than 20 students to each chaperone. Male:_____Female:_____ _____ _____  Special Needs Chaperones: _____ _____
<b>Student Care</b>	Food accommodations: _____  Who is paying: _____  Amount per student: _____
<b>Administrative</b>	<b>Office Use Only</b>  <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> <b>Appropriateness</b></span> <span><input type="checkbox"/> <b>Risk Management Approval</b></span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> <b>Instruction of Participants</b></span> <span><input type="checkbox"/> <b>Instruction of Chaperones</b></span> </div> <div style="display: flex; align-items: center; margin-top: 10px;"> <input type="checkbox"/> <b>Approved</b>    <input type="checkbox"/> <b>Denied</b>    _____         </div> <p style="text-align: center; margin-top: 5px;"><b>Activities Coordinator</b></p>

Distribution: White-Activities Coordinator; Yellow-Club/Activity Advisor/Teacher