

OVERNIGHT FIELD TRIP REQUEST

Northern New England Conference of Seventh-day Adventists, Inc.

This form is to be used for **ALL** overnight trips by the Northern New England Conference schools. This form is to be submitted to the Superintendent of Schools who will then take it to the Northern New England Conference Board of Education.

Name of Group: _____ Date of Application: _____

Trip Destination: _____

Date of Trip: _____

Sponsors' Names: _____

Board Approval (date): _____

Written Parental Permission: _____

Number of Students in Group: _____ Organization: _____

Itinerary (Program): _____

Transportation (Insurance Limits): _____

Financing: _____

Arrangements for Class Coverage (explain): _____

Goals and Objectives for Trip: _____

Approved Denied

Sponsor's Signature: _____ Date: _____

Principal's Signature: _____ Date: _____