

Bucyrus City School DistrictPROPOSAL FOR OVERNIGHT/EXTENDED STUDENT TRIPS

Type of Trip Volleyball / JV - Varsity
Proposed Departure Date 7-8-24 Return Date 7-10-24
Proposer Amber Christy Position Head Coach - VB
Date by which response is needed _____ Proposal Date 12-7-23

A. Purpose

1. What is the major place to be visited or event to be attended?

Sports express sports Center

2. How is the trip related to the educational program of the District?

gain playing Experience

3. In what ways will the students benefit?

Lots of hands on play

4. In what ways will the District benefit?

/

5. How will the trip be evaluated to determine the extent to which these benefits were realized?

sports Season

B. Students and Staff

1. Which students, (grade, class, or organization), will be going?

JV - Varsity VB Players

2. How many students in total?

10-12

3. How many students are currently experiencing academic problems?

NONE

4. Which staff member will be in charge?

Amber Christy
Kelly Stine

5. What previous experience has the staff member had in conducting overnight or extended field trips?

last season trip

6. What other staff members will be going?

NONE

7. How many chaperones, in addition to staff members, will be going?

2

8. What are their names and affiliations with the students?

① Tonya Kimmel - Mom of Aubrie

② Linda - Busdriver (we hope)

(Grandmother of Brooklyn Ryland)

9. How many school days will be missed?

NONE

10. How will teachers be advised in advance that the students will be out of school?

DNA

C. School Work

1. How will missed work be made up?

DNA

2. What special assistance will be provided students with academic problems?

DNA

D. Itinerary

1. What is the destination?

Sports Express Volleyball Center
5280 St Rt 741
Mason, OH 45040

2. What will be the mode of transportation? What liability insurance does the carrier have?

Bus

3. Where will the group be housed and fed?

Drury Inn

4. What enroute or supplementary activities are planned?

Kings Island

5. What arrangements have been made for dealing with emergency situations?

Parental Contact
Emerg. Med forms

6. What arrangements have been made for administering necessary medications to students while on this trip?

Parental Consent

7. If tour guides are involved, what liability insurance do they carry?

E. Finances

1. What is the estimated total cost and cost per student?

\$ 200.00

2. What is the source of funds?

Fundraise / VB Booster Acct.
Parents

3. How will the funds be collected and safeguarded?

To head coach + then directly
to booster acct.

4. How will any shortfall be made up or excess funds used?

5. What provision has been made for students who are financially unable to pay any necessary costs?

VB Booster Acct.

F. Communications

1. How will you communicate to parents prior to, during, and after the trip?

BAND App.
Letters home w/players
Text

2. List telephone numbers at destination and where group will be housed.

Drury Inn + Suites
9956 ESCORT Drive
Mason, OH 45040
513-336-0108

3. What information will be provided to the media and the community?

will post on facebook

Signature of the Requestor

Date

Approved:

Principal

Date

Board of Education

Date

