

Bucyrus City School District

PROPOSAL FOR OVERNIGHT/EXTENDED STUDENT TRIPS

Type of Trip MS Cheer Camp
 Proposed Departure Date 6/27/25 Return Date 6/28/25
 Proposer Crystle Siegel Position MS Cheer Coach
 Date by which response is needed _____ Proposal Date 24 April 25

A. Purpose

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

Cheer Camp

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

learning purposes

3. In what ways will the students benefit?

Team bonding Game day/Side line Technique
 Sport Safety Knowledge
 Stunting Technique

4. In what ways will the District benefit?

Stronger Cheer Team/Individual Athletes
 Brings attention to the sport + helps grow the program.

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

After Action/ Hot wash report

B. Students and Staff

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

Entire 2025-2026 MS Cheer Team (16 Athletes)

2. How many students in total?

16

3. How many students are currently experiencing academic problems?

none

4. Which staff member will be in charge?

MS Cheer Coach - Crystle Siegel

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

none at school - more than 20 w/ all star cheer

6. What other staff members will be going?

none

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

1 Team cheer parent (coached Red machine for 2 years)
Ohio Wesleyan Cheerleaders / Coach

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

Natasha Turner-Rowe - mom to an 8th grader

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?

N/A

C. School Work

1. How will missed work be made up?

N/A

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

N/A

D. Itinerary

1. What is the destination?

Mid Ohio Gymnastics
2876 Harding Hwy E, Marion OH 43302

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

~~Bus~~ School Bus

3. Where will the group be housed and fed?

At mid Ohio Gymnastics

4. What enroute or supplementary activities are planned?

none

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

emergency contact /waiver forms are mandating
nearest hosp. info listed

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

same as above - parents need to annotate what
the medication is, if athlete can administer, or if
help is required

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

N/A

E. Finances

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

\$175

2. What is the source of funds?

Athlete expense / Fundraiser

3. How will the funds be collected and safeguarded?

Turned into MS Coach - ~~Coach~~ Coach
pays fees to: Ohio Wesleyan Cheer Team
Mid-Ohio Gymnastics

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

N/A

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

Fundraisers

- none have been brought to our attention
as of 23 April 2005.

F. Communications

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

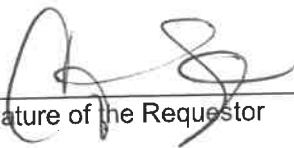
Via Thrill Shore + Parent text

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

740-387-1975

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

none



Signature of the Requestor

23 April 25

Date

Approved:



Principal

4/24/25

Date



Date

Board of Education

Date

