



**SOUTH DELTA SECONDARY SCHOOL  
NOTIFICATION OF GROUP TRAVEL**

Group: \_\_\_\_\_ Date of Notice: \_\_\_\_\_

Student: \_\_\_\_\_

Teacher(s) In Charge: \_\_\_\_\_

Other Adult(s) in charge: \_\_\_\_\_

Purpose(s) of Travel: \_\_\_\_\_

Destination and/or Itinerary: \_\_\_\_\_

Departure Time and Date: \_\_\_\_\_

Returning Time and Date: \_\_\_\_\_

Major Activity(ies): \_\_\_\_\_

Sponsor Host (Where Applicable): \_\_\_\_\_

Equipment/Supplies Required: \_\_\_\_\_

Arrangements To Meets Costs: \_\_\_\_\_

If travel involves an overnight stay arrangements for accommodation:

\_\_\_\_\_

Emergency Telephone Number: \_\_\_\_\_

\_\_\_\_\_

**Principal's Signature**

*If you wish to have your child participate in this field trip, please complete the portion below and return the entire form to your child's teacher.*

*The completed form must be on file at the school before your child will be permitted to participate.*

I(We) request permission for my/our son/daughter, \_\_\_\_\_ to participate in the field trip

To \_\_\_\_\_ on \_\_\_\_\_.

I (We) understand that supervision will be supplied by the school.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**Parent or Guardian**

**Teachers's Signature:**

Block A		Block E	
Block B		Block F	
Block C		Block G	
Block D		Block H	

**PRIVATE TRANSPORTATION ARRANGEMENTS**  
(to be completed by Parent and/or Volunteer Driver)

• I am willing to transport students or equipment. I can drive \_\_\_\_ (no.) students.

Adult's Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

• I will be driving my son/daughter to this event. \_\_\_\_\_ (Signature)

• My son/daughter requires transportation. I give permission for him/her to travel as a passenger in a car driven by an adult (over 19). \_\_\_\_\_ (Signature)

• My son/daughter requires transportation. I give permission for him/her to travel as a passenger in a car driven by a student. \_\_\_\_\_ (Signature)

• I give permission for my son/daughter to drive him/herself to this event. \_\_\_\_\_ (Signature)

• I give permission for my son/daughter to drive other students. \_\_\_\_\_ (Signature)

**TO THE ATTENTION VOLUNTEER DRIVERS:**

If you wish to be a volunteer driver for this field trip, you must review **Operations 1253.5 - Student Transportation by Volunteer Drivers**, which is available at the school office.

Listed below are a few reminders to help make your trip safe and enjoyable:

- Please ensure that all students are wearing seatbelts before starting the vehicle;
- Only the driver and one student over the age of 13 are to be in the front seat of vehicles equipped with a front airbag on the passenger side;
- Check with the teachers before departure as to the route and parking arrangements;
- Please drive within the speed limit and be particularly cautious at intersections;
- If there is a problem with students, please stop the car to deal with the situation. If needed, call the school and we will arrange for the pickup of the student.

**I acknowledge that I am a Volunteer Driver for this field trip and have read and understand the document "Student Transportation by Volunteer Drivers" (Operations #1253.5).**

\_\_\_\_\_  
Signature of Volunteer Driver

\_\_\_\_\_  
Date