# Brecksville-Broadview Heights City Schools
# Application to the Board of Education
# Proposal for Overnight/Out of State Trip

***Please submit an application to the building Principal/Athletic Director for initial approval before submission to the Board of Education.***
Please provide all of the following information:

Group or Organization: _____**HS Gymnastics**_____
Staff Member in Charge/Position: ____**Maria Schneider**_____
Name of Event: _____**Gymnastics State Tournament**_____
Destination: _____**Columbus Ohio**_____
Departure/Arrival Information:
Leave School Date: ___**3/6/27**_____ Time: ___**7 am**_____
Return to School Date: ___**3/7/27**_____ Time: __**8 pm**_____

Date by which response is needed: ____**December 1, 2026**_____

**Trip Expenses:**

1. Transportation:

Mode of Transportation:

__**X**_ School Bus Number of Buses: __**1**_____

___ School Van Number of Vans: _____

___ Other Transportation -

a. Name of Company: _____

b. Does the carrier have liability insurance? ___ Yes ___ No

c. What kind of liability insurance? _____

d. Are turnpike fees included? ___ Yes ___ No

***Total Cost of Transportation*: ___TBD by Transportation**_____

2. Lodging Information:

a. Name: ____**Mariott Columbus Northwest**_____
b. Address: _____**5605 Blazer Parkway, Dublin OH, 43017**_____
c. Lodging Contact Name(s): _____**Jessica Cowger**_____
d. Lodging Phone Number(s): _____**614-791-1000**_____

***Total Cost of Lodging:* ___$1764**_____

3. Meals (List all meals included in the trip. Please note how many meals will be participants' responsibility).

from ATHLETIC FUND. Provide girls with lunch and dinner Saturday. Sunday breakfast included in hotel. Dinner on way home. Kids can bring money for concession stand. Parents typically purchase snacks for them to have during the competition.

***Total Cost of Meals:*** **$1500.**

4. Are there any supplementary activities? Are entry fees required? More tickets for girls not competing and tshirts from principal fund

***Total Cost of Activities***: _____**$500 approx.**_____

***Calculation of Event Expenses:***

1. Transportation: _____**TBD**_____
2. Lodging: __**$1764 Paid by HS Athletics**_____
3. Food: _____
4. Event Fees: _____
5. Other: _____**$500 (paid by gymnastics)**_____

***Total:*** ____**$1764 paid by HS athletics** _____

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

**All necessary communication with the school nurse will be completed a month prior to leaving for the trip. Communication will include conversations with school athletic trainers.**

6. What arrangements have been made for dealing with emergency situations? Who will be responsible for all medical information sheets? How will the forms be stored and transported?

**All pertinent medical information is located within final forms which all coaches have access to. The team will travel with a med kit. Trainers and doctors will be on site during the event.**

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

**N/A**

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

**N/A Athletics Trip**

9. In what ways will the students benefit? How will the District benefit?

**N/A Athletics Trip**

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

**N/A Athletics Trip**

11. How many students in total? Are any students experiencing academic problems? What previous experience has the staff member had in conducting overnight or extended field trips? What other staff members will be going?

**Members of the gymnastics coaching staff have over 25 plus years of experience with successful overnight travel. This trip will include 25 athletes and 5 coaches.**

**Coaches:**

**Maria Schneider, Leah Miko, Joan Ganim, Alyssa Campbell, Rachel Kelly**

12. How many chaperones, in addition to staff members, will be going? What are their names and affiliations with the students?

**No other chaperones will be attending in addition to the coaches.**

13. Will any school days be missed? If so, how many? How will teachers be advised in advance that the students will be out of school? How will missed work be made up? What special assistance will be provided to students with academic problems?

**No school will be missed. This is a Saturday to Sunday trip.**

14. Estimated cost to the organization and how is this trip funded? How are the funds collected and safeguarded? How will any shortfall be made up or excess funds used?

**This trip is funded by BBHCSD Athletic Department. Approximately $2000**

**Date of Submission to Principal/Athletic Director: October 16, 2026**

**Signature of Principal/Athletic Director indicating endorsement:**

**Approved by Superintendent Date**

**Date Approved by Board of Education**