

## DISTRICT 197 OVERNIGHT OR EXTENDED TRIP REQUEST- FORM 2

Form 1 must have been completed and approved before submitting Form 2

Submit to Principal/Administrator and Superintendent's Office no less than two months prior to domestic travel and no less than 4 months prior to international travel.

Staff Member Name and school: Isaiah Robinson Two Rivers High School

Date of Trip/Destination/Who trip is for: 6/26/2025-6/27/2025 , University of Wisconsin Madison , Two Rivers Boys Basketb

Did you complete **FORM 1** for this trip and receive the required approval? Yes

TOUR CHECKLIST	RESPONSE
1. Dates of travel	6/26/2025-6/27/2025
2. Trip destination	University of Wisconsin Madison
3. <b>SUBMIT:</b> Complete roster of travelers. Include a link to your roster in the response or attach a document. <i>Link to roster template: <a href="#">TOUR ROSTER</a></i>	
4. <b>SUBMIT:</b> Detailed Itinerary, including hotel names, addresses and phone numbers. Include a link or attach a document with these details in your response.	
5. Final number of <b>student travelers</b>	13
6. Final number of <b>adult travelers who are paying their own way/fare.</b>	2
7. Final number of <b>adults travelers who are traveling with a free or reduced fare. [If any, include the amount by which their fare is reduced]</b>	0
8. Final number of <b>district employees (also include in #6 and #7 counts)</b>	2
9. <b>Ratio</b> of adults to students	1:7
10. <b>FINAL TOTAL of Number of Travelers (Adults and Students)</b>	15
11. Have parents received detailed information about the cancellation policies and fees?	No

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12. Is travel insurance through the tour company required OR optional for your travelers?	Optional
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13. Has the district completed background checks for <u>all</u> adults?	Yes
14. Is this a private tour, or will you be traveling with students from other schools? If so, please include the full roster of the adjoining group.	Private , Just Two Rivers Boys Basketball
15. How will you communicate with travelers while on tour?	GroupMe App and phone numbers in case of emergenc
16. How will you communicate with families back home/not on tour?	Group email update. Phone calls if needed.
17. What is your plan for those requiring medication?	Sending a reminder prior to leaving that all students hav Needed medication. Check in with them to confirm Medication has been taken.

Staff Member's/Group Leader's Signature

Date 04 / 17 / 2025

### Required Approvals:

PRENTICE SMITH AD

4/18/25

Principal Signature

Date

Superintendent/Designee Signature

Date

School Board Approval

Date Approved

Once this form has been signed by your site administrator, submit it to the Superintendent for review and approval. It will then require School Board approval. Once approved, a signed copy will be returned to you for your records.

**DRAFT-DISTRICT 197 OVERNIGHT OR EXTENDED TRIP REQUEST**  
**FORM 1- Site and district approval is required before students/families are notified of the trip and before any funds are collected for the potential trip.**

**Part 1 - Approval to Plan & Recruit for an Extended Trip- COMPLETE IN FULL**

Date of this request: **02/26/2025** Your name and school: **Two Rivers High School**

Your Email: **isaiah.robinson@isd197.org** Your Phone Number: **651-263-6914**

Date Principal was notified of this trip: \_\_\_\_\_

Dates of Trip: **6/26/2025-6/27/2025** Date/Time Leaving: **10am 6/26** Date/Time Returning: **8pm 6/27**

Destination(s): **University of Wisconsin Madison – Kohl Center / Double Tree by Hilton / Madison, WI**

Who is this trip for (subject and grade levels)? **Varsity Boys Basketball 9<sup>th</sup>-12<sup>th</sup> grade Returning JV/Varsity**

Players \_\_\_\_\_

Estimated number of students that will participate: **15**

Estimated number of chaperones that will participate (all chaperons must undergo a background check): **Atleast 2, Pending parents answer**

\*Chaperone names: **Isalah Robinson (Head Varsity Coach , Aaron Ertz (Assistant Varsity Coach)**

**What is your chaperone ratio:** One Adult Chaperone for every **8** students (minimum of 2 regardless of the number of students and at least 1 for every 10 students). \*Chaperones are defined as adults (minimum age of 21) who accompany and oversee groups of students. At least half (and no less than 2) of the chaperones must be current School District 197 employees. **(Exceptions can be made to this requirement by the Superintendent. Provide rationale.)**

Form of Transportation: **Carpool - Adults / Parents** Transportation Costs: \$ **0**

(For liability purposes, all transportation must be provided by district transportation, contracted services, or public transportation. Private transportation is NOT allowed. Vehicle rentals are considered a contracted service. Allowable vehicles are specified and drivers must have a Type III license. Call the ISD 197 Transportation Department at 651-403-8320 for details.)

Lodging Name/Location: **Double Tree by Hilton Madison Downtown** Lodging Costs: **\$1600 Roughly**

(For liability purposes, all lodging must be public accommodations - hotel, public dormitory, etc. Exceptions may be requested and submitted to the Superintendent for consideration and possible approval.)

Cost per adult/chaperone: \$ \_\_\_\_\_ Costs covered by: **Booster Club/Fundraising**  
Cost per student: \$ \_\_\_\_\_ Costs covered by: **Booster Club/Fundraising/Player/Parent**

Sub costs, if any, paid by: **Booster Club/Fundraising / Player/Parent** TOTAL COST: \$ \_\_\_\_\_

Please list all current School District 197 employees who will accompany this trip: **Isaiah Robinson (Head Varsity**

**Coach , Aaron Ertz (Assistant Varsity Coach)**

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**notified of the trip and before any funds are collected for the potential trip.**

Provide a general description of the trip and include 1) the educational purpose/goal of this trip and 2) a summary of the agenda/itinerary (feel free to note and attach additional documentation): \_\_\_\_\_

**University of Wisconsin Madison Basketball High School Varsity Team Camp. Two games on Thursday 6/26 evening and Two games during the day on Friday 6/27 @ Kohl Center / University of Wisconsin Madison Gym Facilities.**

- 1. Goal of this trip would be to expose our team to competition in a state we normally would not be able to play in. Gain experience playing in front of college coaches. Increase team bonding/chemistry through travel, bonding, and competition.**
- 1. Educational Purpose of this trip would be to explore the University of Wisconsin Madison a very prestigious school and open our kids eyes to the campus and provide thoughtful thinking about continuing education post high school.**
- 2. Agenda/Itinerary:**
  - **6/26**
  - **Thursday Morning depart from Two Rivers to Madison, WI – 4 ½ / 5 hour drive**
  - **Check In to hotel**
  - **Explore Madison / Campus as a team**
  - **2 Games Thursday evening between 6pm-10pm**
  - **Return to hotel for team bonding/hanging out**
  - **Room check / lights out**
  - **6/27**
  - **Team Breakfast at Hotel**
  - **Explore Madison / Campus as a team Pending game schedule**
  - **2 games during the day times TBD – Games done no later than 4pm**
  - **Leave Madison to head back to Two Rivers 4 ½ / 5 hour drive**

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If applicable, Tour Company Name: \_\_\_\_\_

If applicable, Tour Company Customer Service Phone #: \_\_\_\_\_

If applicable, Tour Company Emergency Phone #: \_\_\_\_\_

Trip Leader experience with educational travel as an adult (attach additional sheet if more space is needed):

Year	Destination(s)	# of Student Travelers	Age Range of Travelers	Your Role (coordinator, adult/chaperone, parent)

**As the trip leader, I assure that...**

***[Please check the boxes that apply below, review the linked document, and sign the form before submission]***

☒ I have not/will not communicate this potential trip until preliminary approval of this form has been attained from both the principal and superintendent.

☒ I will follow the room assignment procedures outlined in the [Overnight Field Trip and Gender Inclusion Procedures document](#).

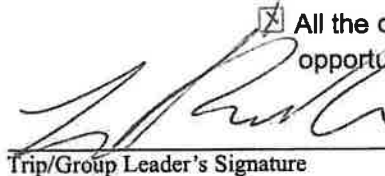
☒ When the trip is communicated to families, communication will include:

- ☒ that the trip has received preliminary approval, but will not receive final approval until closer to the date of the trip
- ☒ that the trip may be canceled for a variety of reasons (insufficient chaperones, pandemic, destination issues)
- ☒ that students will complete a room assignment preference form
- ☒ the financial details describing:

☒ Any fees that will not be refunded by the company or district if the trip is canceled

☒ Options for travel insurance (including potential areas the insurance WON'T cover (cancellation, etc.))

☒ All the options for meeting the financial commitments of the trip (family pays, fundraising opportunities, etc.)



Trip/Group Leader's Signature

3/14/2025  
Date

**Part 2 - Approvals:**