

LEWISTON-ALTURA SCHOOL DISTRICT EXTENDED/OVERNIGHT FIELD TRIP APPLICATION

Date of Field Trip: _____ Requested By: Matthew Wilson Destination/Event: Jordan
Time Leaving School: 11:00 AM Jan 11 ^{Sunday} Time Returning to School: 6 PM Mandy Jan 12
Purpose of Field Trip: Choir Performance # of Students: 4 # of Adults: 1

Please check the approved volunteer list or check with the office to ensure that all volunteers are approved.
Will there be any parent volunteers or chaperons not including staff? Yes ☐ No ☒

If yes, please list the names: _____

Will you need district transportation? ☒ Yes ☐ No If yes, # of busses or vans needed 1 van
If you need district transportation, arrangements were made with
Haley Mathew (Name) on 12/3/25 (Date).

If district transportation is unavailable or impractical, other transportation arrangements were made with

(Name of the Company) on _____ (Date).

Will students be absent from school? ☒ Yes ☐ No
So that additional contacts can be made (food service, buildings and grounds, etc.), I notified


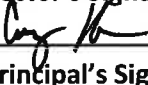
(Office Staff Signature) on _____ (Date).

Budget Information: Approximately \$30-\$50 (Program being billed for costs)
Transportation Cost: NA
Lodging Cost: In Fee, none for chaperone
Meal Cost: Student pay \$30
Entry Fees: per person on 12/8/25

Please attach a copy of the Field Trip Parental Permission form and any additional guidelines or expectations.

OFFICE USE ONLY

Date application was received (Must be received prior to a board meeting when possible: 12-5-25

APPROVED	NOT APPROVED	Rationale for not approving the field trip:
<u></u>		<u>12/5/25</u>
(Activity Director's Signature if Applicable)		(Date)
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(Principal's Signature)		(Date)
(Superintendent's Signature)		(Date)
(School Board Member's Signature)		(Date)



LEWISTON-ALTURA PUBLIC SCHOOLS EXTENDED FIELD TRIP PERMISSION FORM



In compliance with school regulations governing special field trips of a curricular or extra-curricular nature, the following information is provided, so that as a parent/guardian of the student involved you will be aware of the circumstances under which the trip is being taken. Your permission must be obtained prior to the trip and may be given by signing the lower portion of this form and returning it to the classroom teacher sponsoring the trip.

All students participating in school-sponsored field trips must go and return on the transportation provided.

FIELD TRIP DETAILS	
NATURE AND PURPOSE OF FIELD TRIP	
SCHOOL SPONSORING TRIP	
INSTRUCTOR OR SPONSOR OF FIELD TRIP	
FIELD TRIP DESTINATION	
DATE OF FIELD TRIP	
DURATION OF FIELD TRIP	
COST OF THE FIELD TRIP TO STUDENTS (LODGING, MEALS, ETC.)	
HOTEL INFORMATION (LOCATION, CONTACT INFORMATION)	
STUDENTS REPORT TO	
STUDENTS WILL RETURN TO	
STUDENTS SHALL BRING THE FOLLOWING MATERIALS WITH THEM FOR USE ON TRIP	

I understand the conditions described above and give my permission for _____ (Student Name) to participate in the designated field trip. I further understand that neither the sponsor, school administration, nor the school board of District #857 assumes any unusual responsibility for the safety and welfare of my child.

parent/guardian signature

date

☐ My student has a medical record on file with the Lewiston-Altura Public School district that advisors need to consult prior to the trip. (Check only if this applies to your student.)