



**HARLETON ISD  
FIELD TRIP REQUEST FORM**

Employee Requesting: C. Siler

Class or Organization Attending: HHS Cheer

Location of Trip: Great Wolf Lodge - Grapevine

Purpose of the Trip: recognition

Date Leaving: 10-18-25

Time Leaving: 12:00 pm

Date Returning: 10-19-25

Time Returning: 2:00 pm

Approximate Number of Students Attending: 14

Number of Chaperones/Teachers: 2

Number of <sup>Vans</sup> Buses: 2

Chaperone/Teacher Names: \_\_\_\_\_

Bus Drivers: \_\_\_\_\_

Christi Siler

Christi Siler

Estimated Cost per Student \$ 130<sup>00</sup>

Student or School Funded school

If School Funded, Account Code: \_\_\_\_\_

Purchase Order Entered: \_\_\_\_\_

Transportation Request Emailed: not yet

Purchase Order Amount: 2180<sup>00</sup>

Deposit Required: \$ \_\_\_\_\_ Credit Card or Check: \_\_\_\_\_

Paid: \_\_\_\_\_ Bal. Due: 2180<sup>00</sup>

not yet  
budget not  
open for  
25-26

Additional Information: This is an invitation only event. The team was invited as a result of all the awards they received at camp this summer.

Principal's Signature: Crystal Bunn Date: 8/22/25

Superintendent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OVERNIGHT OR OUT OF STATE TRIPS MUST HAVE BOARD APPROVAL**

Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_



**Harleton**  
Independent School District

**Jay Ratcliff**  
Superintendent

**HARLETON ISD  
FIELD TRIP REQUEST FORM**

Employee Requesting: C. Siler  
Class or Organization Attending: HHS Cheer  
Location of Trip: Ft. Worth  
Purpose of the Trip: UIL competition  
Date Leaving: 1-14-26 Time Leaving: 12:00pm  
Date Returning: 1-16-26 Time Returning: 4:00pm  
Approximate Number of Students Attending: 116  
Number of Chaperones/Teachers: 2 Number of <sup>Vans</sup> Buses: 2  
Chaperone/Teacher Names: C. Siler Bus Drivers: C. Siler  
C. Russell C. Russell  
Estimated Cost per <sup>2A Team</sup> Student \$ 350<sup>00</sup> Student or School Funded school  
If School Funded, Account Code: \_\_\_\_\_ Purchase Order Entered: \_\_\_\_\_  
Transportation Request Emailed: not yet Purchase Order Amount: 350<sup>00</sup>  
Deposit Required: \$ \_\_\_\_\_ Credit Card or Check: \_\_\_\_\_ Paid: \_\_\_\_\_ Bal. Due: 350<sup>00</sup>

*budget not  
open  
yet*

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Principal's Signature: Cynthia Bona Date: 8/22/25  
Superintendent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OVERNIGHT OR OUT OF STATE TRIPS MUST HAVE BOARD APPROVAL**

Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_