 **E-MAILED**
3/24/25

LYON COUNTY SCHOOL DISTRICT
TRAVEL REQUEST

NOTE: See LCSD Board Policy GBCF: Work-Related Travel for all requirements.

Name(s) of Attendees FHS Class of 2025 and Senior Class Advisors

SCHOOL Fernley High School

NAME OF CONFERENCE: Senior Trip (Vallejo, CA)
(Do Not Use Acronyms)

(ATTACH conference program information and provide website address)

CITY/STATE OF CONFERENCE: Vallejo, CA

DATE OF DEPARTURE: 6-9-2025

DATE OF RETURN: 6-9-2025

Training/Travel/Conference is (check all that apply): Mandated by the state ☐ Mandated by the district ☐
Needed for certification/licensing ☐ Related to the District Performance Plan ☐ Related to our School ☐
Performance Plan ☐ Related to a specific program/course ☐ Other ☒

Provide a detailed description below of the focus of the conference, and how attending will have a positive impact on climate, culture, and student learning.


Senior Class of 2025 would like to attend Six Flags in Vallejo, CA for their final trip together as a class. This trip will provide the senior class one last time to be together before graduation and have some quality time and fun with each other. The class will travel with their advisory teachers who they have had for the last four years. Trips like this make lasting memories for both staff and students. This class has worked hard to secure the money to be able to afford this trip. They worked hard at events to raise the funds to be able to offer this one last trip to their classmates.

TRAVEL APPROVED: Date _____

TRAVEL APPROVED: Date 3/25/25



Site administrator or supervisor signature



Superintendent or designee signature

District Office Use Only

Received by District Office

Date: 3/24/25

Board Approved: Yes () No ()

Date: _____

Please ensure that you read and comply with Lyon County School District Policy GBCF: Work-Related Travel when completing this form and submitting for reimbursable items. Properly mark the funding source of the travel.

ESTIMATED EXPENSES

If funded by a grant or other, specify grant/other name here: Class 2025 - SFA

BUDGET# 10601
 Registration Fees: Attendees 200 x 50 Reg. fee \$ 10,000

District Office	Grant	School Site	Other
		✓	

BUDGET# 10601
 Travel By: Charter Bus \$ 13,822.38
 (Air, district car, private car for personal convenience, etc.)

		✓	
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BUDGET# NA
 Lodging: Room rate \$ X nights \$ N/A

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(Use GSA ratings for lodging and meals www.gsa.gov ATTENDEE WILL OWE DIFFERENCE if applicable) lodging receipts must be obtained and sent to District Office upon return.

Meals: Breakfast \$ X days \$
 Lunch \$ X days \$
 Dinner \$ X days \$
 Incidental \$ X days \$

Substitutes: # of Days X \$ /day

Other transportation fees: (i.e. car rental, taxi, shuttle, parking, mileage to/from airport, etc.) \$

Other Miscellaneous expenses: (attach explanation) \$
 TOTAL EXPENSES \$ 23,822.38

****FAILURE TO COMPLETE ANY PART OF THIS FORM WILL RESULT IN THE FORM BEING RETURNED AND/OR TRAVEL DENIED.**

Conference Information

Conference Dates & Times: **June 9, 2025**

Name of where conference/training is being held
(i.e. Hotel, School, College, Convention Center):

Airline Information

Note: Conference registration and travel arrangements will only be made after school board approval. Only airfare, lodging, and conference registration are eligible for payment prior to traveling. All other expenses will be reimbursed after travel per LCSD Policy GBCF: Work-Related Travel.

Attach your preferred and most economical flight schedule (i.e. Southwest, Delta, United, etc.)

Date & Time you wish to **DEPART**:

Date & Time you wish to **RETURN**:

List any special notes here:

Are you renting a car? ☐ Yes ☒ No How many days?

Note: Car insurance should be declined as the district insurance provides adequate coverage.

Lodging Information

Note: Lodging must be made by Attendee or Site for purchase order payments only. No district office credit card charges.

Lodging
GSA (Per Diem Rate) : _____

All travelers agree to share lodging as
appropriate?

☐ Yes ☐ No

Register under what name(s)?

Name, Address, Phone number of
lodging establishment:

DEADLINE DATE: _____

Code Information: _____

NOTE: Please furnish a copy of any information you have on the conference, workshop, training, etc. Please email travel request with SIGNATURES to Superintendent's office for approval.



PO Box 15707, Sacramento, CA 95852
635 Ferrari McLeod Blvd, Reno, NV 89512

Phone: 916-444-7880

Fax: 916-444-7837

Toll Free: 800-446-2928

Phone: 775-324-4444

info@amadorstagelines.com

www.amadorstagelines.com

Charter Confirmation

Client ID	FERNLEYHIG	Charter ID	25435
Client	Mr	Movement ID	30534
Company	FERNLEY HIGH SCHOOL	Status	Firm
Client Ref 1		Passengers	
Client Ref 2			

Group Name	Grad Trip
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First Pick-up	Fernley High School	Destination	Six Flags Vallejo, CA
Pick-up Date	Mon 6/9/2025 Time 06:45	Arrival Date	Mon 6/9/2025 Time 11:00
One Way	No	Leave Date	Mon 6/9/2025 Time 19:00
Round Trip	Yes	Back Date	Mon 6/9/2025 Time 23:59

First Pick-up Instructions	Destination Instructions
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**Possible driver switch NOT available for all 3/buses we may need hotel rooms instead depending on the number of buses needed

DOT Rules and Regulations allow a driver to be on duty no more than 15 hours with no more than 10 hours of drive time

School is required to book and pay for rooms if they are needed. - Suggest booking the Marriott Grand Residence which is located across the street and early check in needed for a full 9 hour off

Due to your requested hours of service this will require a driver switch in the Reno area

Seats	Vehicle Description	Vehicle No
55	Coach for Charters Only	1
55	Coach for Charters Only	2
55	Coach for Charters Only	3

Movement Totals

\$13,822.38

References

Booking Contact: kvarner@lyoncsd.org 775.240.1892
Emergency Dispatch: dispatch@amadorstagelines.com

Prepayment Due Date: 5/15/2025



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This confirmation serves as your contract for your transportation. Full payment is due 30 days prior to departure for travel May 1st -June 15th. Full payment is due 14 days prior to departure for travel June 16th-April 30th. You are responsible for paying on time, otherwise the charter is subject to cancellation without warning.

There is a \$500 cancellation fee for trips cancelled within 14 days of travel. **The exception is: trips cancelled within 72 hours of travel will be at FULL CHARGE.**

Special Events: Require a \$500 non-refundable deposit at time of booking.

Personal items, musical instruments, athletic equipment, baggage and other articles which are for wear, use or convenience of the owner will be transported at the owner's risk at no additional charge.

Price is based upon the information shown above. Any excess time or mileage will be charged accordingly.

While Amador makes every effort to be on time we will not be liable for delays and do not guarantee to arrive at or depart at a specific time. Group is responsible for tolls, parking and entrance fees upon arrival.

THIS CONFIRMATION MUST BE SIGNED AND RETURNED UPON RECEIPT

Authorized Signature: _____ Date: _____



Park Management Corp.
PREPAID AGREEMENT

Payment Address: PO Box 732302 Dallas, TX 75373-2302
Physical Address: 1001 Fairgrounds Dr, Vallejo, CA 94589

Outing Day(s): Monday Outing Date(s): 6/9/2025
Organization/GROUP: Fernley High School Customer #: SF-0000077134
Physical Address: 1300 Highway 95A City: Fernley State: Nevada Zip: 89408
Primary Contact: Diane Chapin Title:
Phone: 775-575-3400 Email: dchapin@lyoncsd.org
AP Contact: AP Phone: AP Email:

Qty*	Price	Tax	Price + Tax	Subtotal	Item/Description
200	\$34.00	\$0.85	\$34.85	\$6,970.00	Admission Only Ticket
3	\$20.00	\$0.00	\$20.00	\$60.00	Parking Pass
13	\$0.00	\$0.00	\$0.00	\$0.00	Complimentary Admission Only Ticket (15:1 ratio)

* 100 Ticket/Package Minimum

SPECIAL PROVISIONS:

OUTING AGREEMENT TERMS AND CONDITIONS:

- Six Flags, subject to the terms and conditions hereof, agrees to provide to above the GROUP tickets/packages at the price(s) and minimum(s) stated above. If the GROUP falls below the minimum(s) they may no longer qualify for the package(s)/price(s), whereupon Six Flags reserves the right to cancel this agreement, and new package(s)/price(s) will be provided.
- GROUP agrees to pay Six Flags for all tickets/packages state in the minimum and assumes full responsibility for all tickets once received.
- "Final Guaranteed" headcount for tickets/packages is due three weeks prior to the outing date and final payment is due fifteen (15) business days prior to the outing date.
Final Guaranteed Headcount Due Date: 5/19/2025.
- Full payment for final guaranteed park admission tickets/packages is due on or before ten (10) business days prior to the outing date above. This payment is non-refundable and non-transferable. Outings paid less than ten (10) business days prior, will be assessed a \$200 rush fee. Accounts with charge backs, or incomplete payments 30 days past due will be assessed an additional late payment charge at the rate of 1.5% per month or the maximum allowed by law on the unpaid balance and the reasonable cost of collection, including bank charge back fees and/or attorney fees.
Final Payment Due Date: 5/26/2025.
- GROUP agrees to pay Six Flags in the form of credit card via secure PayPal link or in the form of one company/organization check made payable to Six Flags Discovery Kingdom. Payments should be mailed via USPS first class mail only to the payment address above.
- Items/merchandise may not be brought into the picnic pavilion for distribution, unless previously authorized by Six Flags in writing. Please request permission in writing with a list of specific give-a-ways.
- Six Flags' trademark, logos or other intellectual property may not be used in any communications or materials in any manner without Six Flags' prior written consent. Furthermore, no promotional materials or other communications regarding the event, or videos or images of the event, may be used or displayed publicly (i.e. other than internally within GROUP's organization) without Six Flags' prior written consent.
- Force Majeure: in the event any acts of god, war, terrorism, disaster, strikes, civil disorder, curtailment of transportation facilities, pandemic, government order or any other event of a comparable nature beyond the party's control make it illegal or impossible for a party to perform its obligations under this agreement, the parties shall reschedule the date of the outing.

This agreement may not be assigned or otherwise transferred by GROUP without the prior written consent of Six Flags. Agreement of GROUP to all foregoing terms and conditions is indicated by signature below. This agreement becomes effective only when received and approved by Six Flags whereupon it shall become a binding contract between us in accordance with its terms and conditions. Six Flags reserves the right to change operating hours and dates, and this agreement may be terminated by Six Flags at any time. Pricing, dates, and operating hours are subject to change without notice.

THIS AGREEMENT MUST BE SIGNED BY A PERSON AUTHORIZED TO EXECUTE SUCH AGREEMENTS.

Signature:

Printed Name:

Title:

ORGANIZATION REPRESENTATIVE

DATE

Diane Chapin

Signature:

Printed Name:

Title:

SIX FLAGS REPRESENTATIVE

DATE