# DERBY PUBLIC SCHOOLS School Trip Proposal / Request Form Travel / Study Approval for Out of State and or Overnight Trips

School: Derby High School Principal: Mr. Pascale	
Date(s) of Trip: March 17 and 18th Trip Organizer(s): R. Bell & R. (	200910
Destination of Trip: New England Spirit Championships	;
Grade level of student participants: 9-12 No. of Students: 17	
Educational Objectives including related classroom activities prior to / following the trip:	<u>sat</u> e
in New England Interscholastic '	
Spirit Cheerleading Championship	<u>S.</u>
Funding Source(s): Operating Budget & Fundrais	sing
Complete if students are paying for all or part of the trip.	
Total fees required from each student: Transportation Cost: N/A Event Fee: N/A Meals	N/A
Lodging: $N/A$	
Source(s) of funds for students who qualify for fee waiver: \( \sum \sum / \beta \)	<del> </del>
Cost of Nurse (if applicable): N/A Funding source: N/A	
Name of travel agent (if applicable): \( \sum / A \)	
Name of transportation service vendor:	
No. of buses required: Cost per bus:	-1h ~
Date / Time of trip: Departing Derby: March 17th   pmReturning to Derby: March 18	5111 4 pr
Number of chaperones on trip:	1
Completed forms should be submitted to the principal who, if the trip is approved, will	
forward this to the Superintendent of Schools and Board of Education for final approval.	
Include the information below when submitting this approval form. (Place a check mark by each item	
indicating its inclusion in the approval packet.)	
Information outlining parental financial responsibility should there be an emergency cancellation	
Parent / Guardian letter explaining the trip and travel itinerary	
Parent / Guardian Permission and Acknowledgment of Risk for Student Travel Form	
Emergency Plan (Includes arrangements for medical needs, parent / guardian contact information,	
access to communication devices, and procedures for general potential emergency situations)	
List of Chaperone Names and Phone Numbers with MPS employees noted	
Telephone Tree in the event of an emergency	

#### Dear Parents/Guardians,

Congratulations! Your daughter is a member of the 2017 CIAC Class S 2<sup>nd</sup> Runner Up Cheerleading team! I could not be more proud of these girls and their performance! Lauren and I are thrilled to take the team to the New England Regional Tournament on March 18, 2017. Since we are staying overnight and out of state, I have attached some important information for you.

For safety, I have all of the emergency medical information and contacts for each girl on the squad. There will be an onsite trainer at the event.

Our team will be staying at the Crowne Plaza Warwick, RI rooms has been booked under Derby High School. Seven rooms will be used for the team and coaches and rooms are available for a group rate to parents as well under Derby High School Cheerleading. Parents will be staying on a separate floor.

Since we are staying overnight, it is important that the student athletes follow all school rules and policies as well as represent our high school in the proper way. We will have a curfew and team dining. The past two years, the hotel management staff was impressed with our behavior and we would like to keep up that reputation this year. As a school-sanctioned event, the student athletes are representing our school and will be expected to stay in a room with other members of the squad as well as eat dinner as a team. They must also ride the bus at all times and cannot go with parents.

The Class S (Division IV in New England) will compete with the Class M (Division III) and COED teams at 2:30 pm at the Providence Career and Technical Academy in Providence, RI. Tickets cost \$10.00. More information about the event is in your packet. Go Big Red!

Thank you, Coach Bell

The following itinerary will give you an approximation of what will happen throughout the weekend.

Friday, March 17, 2017:		
Bus departs from Derby High School	1:00 pm	
Arrive at hotel	4:00 pm	
Check in and room assignments	4:15 pm	
Dinner	6:00 pm	
Curfew	9:30 pm	
Bed check	10:30 pm	
-		
Saturday, March 18, 2015:		
Wake up call	9:15 am	
Breakfast	9:30 am	
Depart for Regional Competition at Providence Career and Technical Academy	12:00 pm	
Registration/Check In	12:30 pm	
Competition begins	2:30 pm	
Competition ends (approximate)	5:30 pm	
Bus departs from Providence, RI	6:00 pm	
Bus stop for dinner	TBD	
Arrival at Derby High School	9:00 pm	

#### **Emergency Plan**

Emergency medical conditions and emergency contact information for every girl on the team is on file and will be coming with us.

Athletic Director, Rachael Caggiano, will be coming with us in case of any injuries or accidents. Superintendent of Schools Dr. Matthew Conway will also be attending the event.

First Aid Kit

Phone tree to parents will be activated in case of emergency. Most parents will be in the Crowne Plaza as well as at the event.

#### Chaperones:

Rebecca Bell, 203-231-6937 \*First Aid and CPR Certified Lauren Anderson, 203-305-2230 \*First Aid and CPR Certified

Rachael Caggiano 203-535-5579

#### Administration/Nurse Contacts:

Martin Pascale: 203-258-4028 Rachael Caggiano: 203-535-5579 Kelly Carloni: 203-305-2819

Numerous Parents will be in attendance at the hotel and event. Rachael Caggiano will be in attendance at the hotel and event.

Phone Tree Activation starts Maria Abel

Hotel Address and Telephone Number:

Crowne Plaza 801 Greenwich Avenue, Warwick RI 02886

#### Cheerleaders:

#### What to bring:

Uniform (top and skirt)
Cheer Sneakers
Competition Bow
White high Nike socks
Warm Ups
2 hair ties and bobby pins
Red t-shirts
Pajamas

Back pack Money for t-shirts and food (fast food at truck stops and at event)

Bottled Water and/or Gatorade

Healthy snacks (protein or granola bars, nuts/dried fruit, crackers, etc.)

Toiletries (toothbrush, hair brush, make up, curling wand, deodorant, etc.)

<sup>\*</sup> Remember to have a safe place to keep all jewelry during your performance, leave any unnecessary jewelry home

<sup>\*\*</sup>Make sure all nail polish is off and nails are cut prior to leaving Derby

### Parent Phone Tree Activation in case of emergency:

In case of emergency, please call the parent listed below you.

Coach Bell: 203-231-6937 Coach Anderson: 203-305-2230

Cheerleader	Parent	Contact Number
Bianca Abel	Maria	203-231-0015
Rianna Frosceno	MaryLyn	203-305-8026
Alex Drezek	Jamie	203-305-5381
Casey Kross	Rayna	203-605-0580
Faith Nagy	Janice	203-906-0087
Sophia Slowik	Trish	203-231-8031
Jessica Fico	Mike	203-734-3776
Vlora Cena	Trioleta	203-906-2706
Hailey Olavarria	Tracy	203-734-5249
Tatyana Abreu	Jose	203-410-9480
Trinity Manchester	Christiana	203-414-3876
Alexis Admans	Heather	203-751-6072
Victoria Ramirez	Teri	203-906-6628
Victoria Hyder	Michele	203-906-6917
Haley Grammatico	Melissa	203-305-0288
Kim Voytek	Pam	203-543-9222
Sam Landona	Phil	203-305-9991

## PARENT/GUARDIAN PERMISSION AND ACKNOWLEDGEMENT OF RISK FOR STUDENT TRAVEL

**Teacher Directions:** After your *School Trip Proposal / Request Form* has been approved, you are required to complete this form, and send it home to parents. Only those students whose parents have signed and returned the form to you will be permitted to go on the school trip. You should follow these directions: 1) Use one form per trip: 2) complete the school portion (top half) of form; 3) duplicate one form per student; and 4) send a copy home for parent and student signatures.

#### **Parent Directions:**

Please read this form, and, if you give your child permission to attend the school trip, sign and return it to your child's teacher.

	Organizer(s): R. Bell & R. Caga				
Destination of Trip: New End					
Educational Objectives: Participate in New Spirit Cheerleading Char	England Interschold				
Supervision:					
Students will be directly supervised by adults at all times.					
Students will be directly supervised by adults with the following	g exceptions:				
A School Nurse will be present on this school trip.					
Transportation Provided: School Bus Charter Bus	Personal Vehicle Leased Vehicle				
Related Risks: Swimming Pool	Beach or Ocean Other None				
Student Agreement:					
Student Name:	Grade:				
While participating on this school trip, I will accept responsibility f with the Derby High School Code of Conduct and I will follow directaperones at all times.					
Student Signature:	Date:				
Parent / Guardian Permis	ssion:				
I have read and understand the attached description of the school to the school trip will involve activities of school property; therefore employees and volunteers will have any responsibility for the cond	e, neither the Board of Education nor its				
I give permission for	to participate in all aspects of this school trip.				
Parent / Guardian Signature:	Date:				
Parent Contact Number:	_				