Morningside Baptist Church Trip Planning Form

(Please submit this form to the Church Office for review by the staff and to check calendar & transportation availability <u>before</u> the event is publicized. You will be contacted by Church staff with confirmation.)

Ministry/Group	Leader	
Date(s) of Trip	Times of Trip	
Number of students/adults expected	to attend this trip/event:	
Total		
Girls (under 18)	Boys (under 18)	
Ladies (over 18)	Men (over 18)	
Transportation needed:		
☐ Check here if Church b	ous needs to be reserved	
Briefly describe the purpose of this	trip/activity:	
Cost of trip/event (Please list below attach a detailed breakdown, if app	the budget line item(s) that this trip/event will licable.):	affect; please
• Budget Line Item(s) & cost this	is trip will affect: \$	
Payment you will receive from	n each person: \$	

Please list fund	raising events that have b	een planned for raising money for attendees:
Date	Description	
Please list the c	haperones/drivers that wi	ll be attending this trip/event:
Name		Role (chaperone/driver)
As the sponsor	of this trip, I pledge that:	
		child abuse prevention guidelines before departing on the trip. genders, at least one chaperone of each gender will accompany
3. If an overnig	to date permission/medical	sleeping accommodations will be provided for both genders. form on each attendee which also includes emergency contact
Please note:		
• For trips with	h a distance of more than 10 arture for the trip, please sul	4 hours, attach a planned agenda for the trip. 00 miles, attach an intended route map for the trip. 00 miles a list of all participants attending this trip/event to the
Submitted By (Please sign.)	Date