ALL AMERICAN NATIONAL CHAMPIONS HIPS

BOYS TENNIS

Palisades Charter High School

## REQUEST FOR APPROVAL OF SCHOOL-ORGANIZED TRIP FOR STUDENTS

Ch		the appropriate box:  Field Trip
Ш		urricular Buss Tour OTHER (Describe)
Nar Sch		Palisades Charter High School  Supervising trip  BUD  LINC  Non-Cert.
Tele	pho	One Number (310) 230-6623 Grade levels (Circle) 9 10 11 12 OTHER
1.		Destination NewPort BEACH Are admission fees charged? Yes
2.		Dates of Trips MAN 23-25 3. Number of Students (2 Number of adults 2
4.		Name and employee number of employee who will go on trip:  EL BUD KUNG 142193
5.	S	Substitute required? Yes No How Many? / Source of funds
6.	T	ime schedule required by school: Leave School 3/230 12° Arrive destination Return school 6 43
7.		ouration of trip: Less than one day One day Overnight (if overnight, how many days?) 3 0 145 2 16 H3
3.	M	Method of transportation: School bus (indicate number required) Walking Automobile ublic Carrier: airplane boat bus train other (explain)
9.	Br re	rief description of educational benefit to be derived form this activity. Please state specifically as an instructional objective (not equired for athletic trips of Youth Services Activities)  The students will  CHAMPION  THE OFFICE VS TOP WOLE COMPETTION
0.	_	ource of funds for trip LODGING PANGUES GAS - TEAM FUNDS  OTE: It is illegal to charge students or parents for participation in any activity for which ADA will be taken.
1.		are the leasting of the second
2.		ave forms for parent's or guardian's permission been obtained? Yes No
3.		hiking or camping activity:
	a.	
	b.	Has the area been checked for potential hazards? Yes No
	C.	Has the School Police Department been notified of the trip? Yes No
	-	VALS: or Asst. Principal
oard	of	Trustees* Date:
ONL	Y T	RIPS INVOLVING SITES NOT ON APPROVED LIST MUST BE PROCESSED THROUGH THE PALISADES CHARTER HIGH L BOARD OF TRUSTEES.
.equ	est	for Approval of School Organized Trip  CoAct  CoAct