

CHELC Field Trip / Activity Planning Form

Name of Person Planning/Leading the Activity:_____

Date of Activity:_____

Location / Destination:_____

Address:_____

Description of Activity:_____

Please list the website for the destination /activity, if available:_____

This activity is planned for ages (grades)_____ through _____

Age restrictions (i.e. no one under a certain age allowed, etc.)_____

Cost per person: Students_____ Adults_____

Group Discount (if available):_____

Payment due by:_____

Travel time needed (use MapQuest, etc., if in doubt)_____

Meeting place for group departure:_____

Planned departure time:_____

Amount of time to allow for activity:_____

Planned time to arrive back at starting point:_____

Lunch arrangements (i.e. Group picnic, lunch on your own, brown bag, lunch not necessary, etc.)_____

Any other information you think is important:_____
