Christ the Teacher Catholic Schools

Curricular Trip Application Form Level 1 – Low Risk, Local

AP 261-01 (Fillable)

(e.g. trip to museum, historic sites, fire hall, nursing home, etc.)

PRINCIPAL APPROVED

:	
ity); request must be made 1 or up to 200 km into Manito	week in advance. ba); request must be made 2 weeks in advance.
	Destination:
	Return Date:(Ex. 09/30/2024)
	Return Time: (Ex. 8:00 pm)
	Cellular Contact Number(s):
	Number of Students:
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4.	Itinerary (please include activities, times, places - this m	ay be provided as an attachment to the form)
5.	Special Needs Addressed	
Addi	itional tasks to be completed by the applicant and submit	·
	Parent/Guardian trip consent forms are returned and are of parents/volunteers, division vans or by bus List of student participants Medical health issues and emergency contact on file Appropriate and adequate travel and supervision arranger Permission for use of private vehicle for each driver must School van or private vehicle student list must be on file Participant fees are to be submitted to the office	nents be approved by the principal and on file in the office
	Signature of Applicant	Date: (Ex. 09/30/2024)
	ature indicates that the applicant has read and understood elated sections of the Physical Activity Safety Handbook	
		and that the arrangements made are in compliance.
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	elated sections of the Physical Activity Safety Handbook : To be completed by t	and that the arrangements made are in compliance. he Principal
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Safety Plan [Briefly describe (or attach to the trip plan) the risk assessment and safety planning process to

address any key risks related to the site/area, weather, activity or group].

3.

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