TRAVEL FORM

This form is to be used for: travel excursions over 160 km one way; out of province excursions; overnight excursions and high risk activities. A copy of this form should be made available to the parents of the participating athletes at least two weeks prior to the event.

Club	
Destination	
Description of activity	
Site of activity	
Number of participants	
Name(s) of coaches	
Name of other supervisors	
Coach in charge	
Date form completed	
Emergency contact phone no	
Please provide the following:	
Please provide the following:	cluding detailed agenda with individual activities, location and route)
Please provide the following:	
Please provide the following: 1. Outline of excursion (inc	

3. Costs				
4. Out o	f province group travel insu	rance		
5. Gend	er appropriate supervisor			
6. Perso	nnel and resources necessary	y		
7. High	risk activities available (pool	ls, waterslides, skiing	, etc.)	
rnatura af	coach in charge		Date	