

Club Sport Travel Itinerary Form

NOTE: Form must be submitted five (5) days in advance of scheduled trip departure date (i.e. for a Saturday trip, form should be submitted on a Monday). For overnight trips, form must be submitted two weeks in advance of departure date.

Team: _____ Trip Name: _____ Submission Date: _____

Purpose of Trip: _____

Destination City & State: _____

Departure Info: Date: _____ Requested Departure Time: _____ Game Time(s): _____

Return Info: Date: _____ Approximate departure time after completion of event: _____

Mode of Transportation (Circle One): **Bus** **Personal Vehicles** Other: _____

Note: If using personal vehicles, drivers must submit required forms before they are authorized to drive.

Host Contact Information- Must be included to process form and approve trip

School/Venue/Competition: _____

Host Contact Name: _____ Host Contact Phone #: _____

Contact Information for advisor/non-student supervisor/coach attending trip:

*Travel with no advisor and/or non-student supervisor must be approved by the University Administrator for Club Sports

Contact Person: _____ Phone #: _____

E-Mail Address: _____

Contact Information for student leaders of trip (2 individuals should be listed):

Contact Person: _____ Phone #: _____

E-Mail Address: _____

Contact Person: _____ Phone #: _____

E-Mail Address: _____

Overnight Trips Must Include Following Information:

Accommodations (i.e. hotel name, address, phone #):

For Office Use Only:

Bus Requested: _____ **Bus Confirmation:** _____ **Bus Company:** _____

Round Trip Miles: _____ **Submitted MyNU:** _____ **Trip #:** _____ **Email:** _____