

## 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 (Select 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:** \_\_\_\_\_