Club Travel Form

To be turned in when making travel arrangements with the Student Life Center/CLEF

Club Name: ___________________________ Today's Date: ___________________________

Title of Conference or Trip: ___________________________

Location: ___________________________

Date & Time of Departure: ___________________________ Return: ___________________________

□ List of attendees is attached (First, Middle, Last Name, MCC Student ID# and Date of Birth)

□ Number of students attending _______ □ Number of chaperones attending _______

(Required ratio of no more than 10 students per 1 Advisor/Chaperone)

□ All attendees have completed the following and forms are attached
  ○ Code of Conduct Form
  ○ Emergency Contact Form
  ○ Online Sexual Harassment Prevention Training

Check all that apply:

□ Meal Per Diem is needed: (no receipts necessary)

□ Breakfast _______ x _______ x $11.00 = _______
  # of people  # of days  Total Amount

□ Lunch _______ x _______ x $12.00 = _______
  # of people  # of days  Total Amount

□ Dinner _______ x _______ x $23.00 = _______
  # of people  # of days  Total Amount

Grand Total: $________________________

____________________________________
Advisor Signature