

Submit ONE **WEEK** before first trip.

Hardeman County School System
Request for Athletic Trips

****Type or Print in Black or Blue Ink****

School: _____

No. of Buses Involved: _____

Athletic Team Involved: _____

Name of Driver(s): _____

No. of Students: _____

Date of Trip: _____

Coach's Signature (Date)

Recommended by Supervisor (Date)

Principal's Signature (Date)

Approved by Director of Schools (Date)

Attach copy of team schedule with each submitted copy of this form.