Date _____ **Coach/Sponsor Name** _____

List of Passenger's Riding Bus for Trip

Coach/Sponsor/Student Name	Coach/Sponsor/Student Emergency Contact Person	Coach/Sponsor/Student Emergency Contact Phone #

***** A <u>completed</u> copy of this form needs to be given to the <u>unit office by 1:30 p.m.</u> the day of the trip. *****