



26920 Pioneer Highway, Stanwood, WA 98292-9548
360-629-1200
www.stanwood.wednet.edu

MEMORANDUM

TO: Board of Directors
DATE: November 3, 2015
FROM: Jean Shumate
RE: Stanwood High School State Athletic Events
TYPE: Action Required

Stanwood High School Girls Swim Team qualified for State competition. Three other teams are continuing to compete in play-offs and have the potential to qualify for State competition, which would be determined after this scheduled board meeting. We ask that you approve all of the teams' overnight field trips, listed below:

Qualified for State Competition:

- Girls Swim State Championship, November 12-14, 2015, Federal Way, Washington,

May Qualify for State Competition:

- Cross Country State Championship, November 5-7, 2015, Pasco, Washington,
- Girls Volleyball State Championship, November 12-14, 2015, Kennewick, Washington, and
- Girls Soccer State Championship, November 19-21, 2015, Puyallup, Washington

RECOMMENDATION:

That the Board approves the Stanwood High School athletic teams' overnight field trips for Girls Swim, Cross Country, Girls Volleyball, and Girls Soccer.

NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION
(To be completed by Teacher/Advisor)

Received 10/27/15 JB

School Stanwood High School Today's Date 10/20/15

Individuals/Group Involved Girls Swim Number of Students 8-10 1 → 9

Activity State Swim Meet

Destination Federal Way

Departure Date 11/2/15 Return Date 11/4/15

Accommodations: Hotel - Clarion

Source of Revenue: athletic general

Fundraising Activities —

Individual Student Cost — Total Group Cost ~\$1,500-

Insurance (special coverages) —

Purpose of Trip (include educational value) State meet for girls who
qualify

Has this trip been previously taken? X If yes, when? last 4 years

List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

Rita Brennan
Connie Schmidt

- 1. Additional information needed: _____
- 2. Insurance coverage to be arranged through the insurance office.
- 3. Parent permission and medical authorization forms go to principal.
- 4. All district employees need to submit a travel request form.
- 5. Notify school nurse.


[Signature]
Signature of Initiator

[Signature]
Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 11-3-15 [Signature]
 Approved

Superintendent or Designee Signature Date

Stanwood  Camano
*** S.L. 11/15/15

NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION
(To be completed by Teacher/Advisor)

on Saturday

School SHS Today's Date 10/26/15

Individuals/Group Involved SHS Cross Country Number of Students 4

Activity State Cross Country Champs

Destination PASCO, WA

Departure Date 11/5/15 Return Date 11/7/15

Accommodations: Red Lion

Source of Revenue: athletic general

Fundraising Activities —

Individual Student Cost 0 Total Group Cost ~ \$1,500

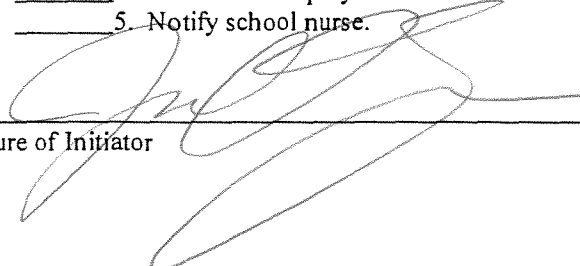
Insurance (special coverages) —

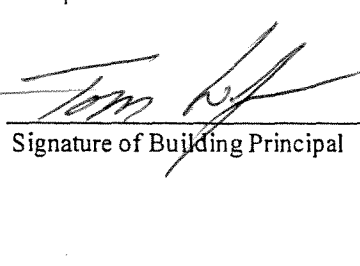
Purpose of Trip (include educational value) State tournament

Has this trip been previously taken? YES x If yes, when? Nov-2014

List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: _____
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to principal.
4. All district employees need to submit a travel request form.
5. Notify school nurse.

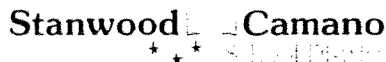
 Signature of Initiator

 Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 11-3-15 JR
 Approved

Superintendent or Designee Signature Date



NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Stanwood High School Today's Date 10/27/15 JR

Individuals/Group Involved SHS Volleyball-Varsity Number of Students ~15

Activity 3A State Volleyball Tournament

Destination Togata Center - Kennewick, WA

Departure Date 11/12/15 @ 10am Return Date 11/14/15 @ 11pm

Accommodations: Red Lion Columbia Center Kennewick

Source of Revenue: athletic general

Fundraising Activities —

Individual Student Cost 0 Total Group Cost ✓ \$3,000-

Insurance (special coverages) —

Purpose of Trip (include educational value) State volleyball competition

Has this trip been previously taken? yes If yes, when? 2012

List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

- 1. Additional information needed: _____
- 2. Insurance coverage to be arranged through the insurance office.
- 3. Parent permission and medical authorization forms go to principal.
- 4. All district employees need to submit a travel request form.
- 5. Notify school nurse.

[Signature]
Signature of Initiator

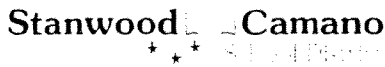
[Signature]
Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 11-3-15 JR
 Approved

Superintendent or Designee Signature

Date



NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Stanwood Hs. Today's Date 10/28/15

Individuals/Group Involved Girls Varsity Soccer Number of Students 18

Activity State Soccer tournament

Destination Puyallup

Departure Date 11/19/15 Return Date 11/21/15

Accommodations: Shilo Inn Tacoma

Source of Revenue: athletic general

Fundraising Activities _____

Individual Student Cost 0 Total Group Cost \$2,200

Insurance (special coverages) _____

Purpose of Trip (include educational value) State tournament

Has this trip been previously taken? If yes, when? 2006

List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

- 1. Additional information needed: _____
- 2. Insurance coverage to be arranged through the insurance office.
- 3. Parent permission and medical authorization forms go to principal.
- 4. All district employees need to submit a travel request form.
- 5. Notify school nurse.

Tom Way for Lon Stutz
Signature of Initiator 10/28/15

Tom [Signature]
Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 11-3-15
 Approved

Superintendent or Designee Signature

Date