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