

## Brightpoint Community College FIELD TRIP AUTHORIZATION

Date:			
Faculty Member:		Club/ Organization	
<u>Purpose of Trip</u>			
Destination of Trip			
Time Required for Trip			
Method of Transportation			
Estimated Expenditures			
List of Students Participating			

\_\_\_\_\_  
Coordinator of Student Activities

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President of Student Affairs

\_\_\_\_\_  
Date

*Student field trips require that students must fill out an Assumption of Risk Form.*