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| Logo  Description automatically generated | Club Sports Out-of-Region Travel Request |

*This form must be completed by any club requesting to travel out of the Northeast or more than six hours from campus. Please submit to the Club Sports office administrators:* *tom.migdalski@yale.edu* *and* *leigh.fitzpatrick@yale.edu*

Note: Please use a different font color for your answers.

**Club Name:**

**Destination:**

**Dates:**

**Purpose:**

**Why it is important to make this trip?**

**Trip History: Has your club made this trip before? YES [ ] NO [ ]. If so, when, and where?**

**How will athletes accommodate missed class time/schoolwork?**

**Traveling student officers’ names *and* contact information (cell & e-mail):**

Team Captain/President:

Co-Captain, President, or Treasurer:

**An “adult” chaperone or other supervising adult must always accompany your club team on this trip. This person can be a coach, grad student, parent, or alumnus. (Note: They may not drive students unless they have taken the Yale Driver Safety Awareness course within four years.)**

Name of supervising adult:

Relationship/position of supervising adult to club:

Are they a current member of the Yale community? YES [ ] NO [ ]. If so, in what capacity?

Cell phone & e-mail of supervising adult:

Supervising adult agrees to take responsibility for the team while traveling: YES [ ] NO [ ]

Please outline specifically how, when, and where the adult supervisor will accompany the team:

Where will the adult supervisor overnight for the duration of your destination? (Note: If this person is a parent and plans to overnight at their home, they must live within ½-hour driving distance of your hotel and agree to have a charged cellphone by their bed to be “on call.” Please provide that address.)

What is your contingency supervisory plan for a team member(s) who becomes injured or ill and can’t return to campus with the team?

* Club Sport participants, coaches, and staff are required to follow the Yale University travel policy: <https://covid19.yale.edu/travel-policy>
* Any expenses incurred by club sport participants, coaches, or staff who are required to isolate when traveling will be the responsibility of that individual. The Department of Campus Recreation, Division of Athletics, and Yale University will not provide funding or reimbursements for the costs associated with isolation.

**Other adult contact(s) present/onsite while out-of-region (tournament director, parent(s), alumnus, hotel manager, etc.):**

Name(s):
Relationship to team:
Cell phone(s) & e-mail(s):

Days/dates and purpose of their association with team:

**Expenses per athlete:**

**Expenses of supervising adult:**

**How are the expenses of the supervising adult paid for?**

**Sources of funding and percentage of each:**

**Medical coverage at contest site:**

**Have you been (or will you be) asked to sign any type of agreement/contract (for example: the use of a training/contest facility or for a recreation/leisure-time activity service or venue)? YES [ ] NO [ ]. If yes, Yale must review a copy, please include.**

**All ground transportation details (*every* leg of the trip must be accounted for):**

**Approved drivers:**

**Air transportation details:**

**Accommodations information (every overnight must be explained, including address):**

**How will team equipment be supervised and stored?**

**How is Yale’s “No Alcohol” policy enforced? What are the consequences if a teammate has alcohol?**

**We agree to use the group or “buddy” system at our destination sites, and no individual will ever be allowed to walk, jog, or travel alone: YES [ ] NO [ ].**

**We agree someone will know where individuals (with buddy) are going, when they’ll be back, and how to reach them: YES [ ] NO [ ].**

**Please explain all “down time” activities, including player accountability:**

**We agree to inform all teammates about Yale travel and no-alcohol policies: YES [ ] NO [ ].**

**We agree to abide by all Yale Club Sport Covid Guidelines: YES [ ] NO [ ].**

**Specific itemized itinerary:**

**Travel roster:**

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| --- | --- | --- | --- |
| Name | SID | Emergency Contact | Emergency Contact # |

**Other important information, notes, or considerations:**