

OUT OF SCHOOL PROGRAMS **Field Trip Module**

Name of Field Trip: _____

Contact Person: _____ Phone: _____

Field Trip Summary (To be published in Resource Guide): _____

Grade level(s) appropriate for: Grades K-12 Grades K-5 Grades 6-8 Grades 9-12

Location in the County: North County South County Central County West County

Days of Week Available: _____

Recreation Module Fee (Please Circle One): Hourly Rate/Flat Rate/Rate per Participant:
(Please complete Recreation Module Fee Worksheet below)

Is Recreation Module Fee inclusive of Supply Cost?
 Yes No If no, please list supply cost: _____

Equipment/Supplies provided by Recreation Consultant: _____

Equipment/Supplies/Space Provided by After School Program: _____

Length of Field Trip: _____

Minimum/Maximum Participants: _____

Additional Comments: _____

Field Trip Fee Worksheet

Please estimate your total fixed and consumable costs.

Type of Expenditures	Estimated Cost
Fixed Cost: i.e. insurance; transportation (vehicle to transport specialty equipment); staff wages; reusable equipment and supplies; athletic and game equipment; art supplies; etc.	
Consumable Cost: i.e. perishable items; paint; glue; clay; prizes and awards; paper; etc.	
Total Estimation of Cost	

*Please note that when establishing your Recreation Module Fee, School Board Policy does not allow for mileage to be included in program fees. Mileage maybe included during Contract Development with the School District.

