

SPORTS CLUB TRAVEL ITINERARY FORM

Club Name: _____

Name of Individual Completing Form: _____

Phone: _____ E-Mail: _____

Cell Phone: _____

EVENT INFORMATION

Event Name: _____

Type of Event: _____

Location (City/State/venue): _____

Date(s) of Event: _____

Contact Person On-Site: _____ Phone: _____

Lodging: _____ Phone: _____

TRAVEL INFORMATION

- Individuals driving who have filled out a personal vehicle travel form:
 - o Vehicle 1 Driver: _____
 - o Vehicle 2 Driver: _____
 - o Vehicle 3 Driver: _____
 - o Vehicle 4 Driver: _____
 - o Vehicle 5 Driver: _____

- List all club members who will be attending the event and riding in one of the above vehicles on roster portion of this document:

Departure from SLU

Date and Time departing SLU: _____

Date and Time arriving at destination: _____

Description of Travel Route: _____

Description of scheduled stops (including lodging information while en route):

Return Trip to SLU:

Date and Time departing event location: _____

Date and Time arriving at SLU: _____

Description of travel route: _____

Description of scheduled stops (including lodging information while en route):

Sports Club Roster

Name

Student ID Number

- 1.
- 2.
- 2.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.

19.

20.

21.

22.

23.

24.

25.

26.

27.

28.

29.

30.

****If you have more than 30 members, please submit the first 30 on this form and add the remaining to an additional numbered page.**