Camp Counselor Group Travel Approval

Counselor Name	
Date of Request	٦
Group Name/Number	
Number of Campers	
Destination	
Destination	
Departure Date	
Return Date	٦
Purpose of Travel	
Travel Details	
Mode of Transportation	
Supervising Adults (Names & Roles)	
Additional Notes or Requirements	
Approval	
Counselor Signature	
Councillo Digitatare	

Date			
Director/Approver S	ignature		
Date			<u> </u>