

## **CHARTIERS VALLEY SCHOOL DISTRICT**

## TEAM TRAVEL REQUEST FORM

- Request must be received by the Business Office as much in advance as possible prior to travel.
  Team Travel is defined as a group of students and school professionals traveling on behalf of the District.

1	Name of Team:	Dance Troupe	17			2 Bud	jet No:	No cost to the dist	rict				
3	Date(s) of Travel:	November 10th	November 10th & 11th 2023										
4	Total # of Travelers:	11 dancers plus	s 2 coaches										
5	List of Schl Professional	ls Traveling:	Riley Maghery										
6	List of Team Members T	raveling:	Sarah LaCamera, Carmela Buffone, Alainsa Ansell, Gabriella Paree, Charlize Svihla,										
6	List Cont'd:	Avalon Armfield	d, Madalyn Stern, Shaffer Kinnee, Delaney Fox, Laci Dzuba, & Lourdes Armfield										
7	Purpose:  The Dance The Dance Troupe is requesting to attend a Regional competition in Commerce Charter Twp, MI at Walled Lake Northern High School. The regional competitions give the dancers experience and feedback to help them prepare for their Nationals in Orlando, Florida where the currently rank thrid in the nation.												
8	Please attach a copy of any documentation that supports the reason for travel to this request.												
		11					itimated xpenses	PO#	Amounts Prepald by the District				
9	Registration Fee		\$	560.00		\$ -							
10	No. of Days Substitute F	Required:	х	\$ 123.00	/per Day	\$							
11	Total No. of Nights and f	Rooms:	х		/per Day	\$	•						
12	No. of Breakfasts		X	12.00	/per Day	\$	•						
13	No. of Lunches		х	18,00	/per Day	\$	•						
14	No. of Dinners		х	25.00	/per Day	\$	•						
15	Transportation	No. of Miles:	×	0.655	/per Mile	\$	-						
16	Other Expenses-Describ	e purchase:				J <u> </u>							
17	17 Total Estimated Expenses						560.00		\$ -				
	Cash Advance Amount 8	<u> </u>			******		1						
19 Requester's Signature: Riley Maghery							Date: 8/17/2023						
20	Principal/Athletic Dir	Da	Date: 8/18/23										
			A	DMINISTRA'	TION ROUTIN	lG	<u> </u>						
Su	Superintendent:							Date:					
Dir	Director of Finance						Date:						
			BOARD	OF EDUCAT	ION AUTHOR	RIZATION							
Ap	proved by the Board of Ed	ducation on:						Date;					
		-											



## This page should be filled out with actual expenses after the event and returned to the Business Office within five (5) working days from the date of travel with attached itemized receipts.

1 Name of Team: Dance Troupe							
2 Date(s) of Travel: November 10th	& 11th 2023						
3 Total # of Travelers: 11 Dancers & 2	Coaches	_					
-				1 1	ctual penses	PO#	Amounts Prepaid by the District
4 Registration Fee			******	\$	560.00		
5 No. of Days Substitute Required:	х	\$ 123.00	/per Day				
Total No. of Nights and Rooms:	х		/per Day	\$	-		
7 Total Meals Expense	limit total)	\$	-				
Other Expenses-Describe purchase:	\$	-		_			
Other Expenses-Describe purchase:				]			_
O Other Expenses-Describe purchase:	\$	-		_			
1 Transportation No. of Miles:	×	0.655	/per Mile	\$	•		
2 Total Expenses		\$	560.00		\$ .		
3 Less Advance Received (enter as a posi	tive amount)						_
4 Total Amount to be Reimbursed (+) Retu	J <b>S</b>	560.00					
5 Requester's Signature: Riley M	2aghery			Date	e: 8/17/2	023	
6 Depart Head Signature:	Date:						
	A	CCOUNTING	INFORMATIO	DN			
Building Travel Acct No.:			No cost to	the distric	ot **		
	A	DMINISTRA	TION ROUTING	G			
Director of Finance	Date:						



**Brand** UDA **Event**UDA - Great Lakes Dance Challenge

**City** Commerce Township State MI **Start Date** 11/11/2023

**End Date** 11/11/2023

## - Close Event Details

**Event Information** 

Team Type: School, All Star

Event Type: Dance
Game Day: Offered

Location:

Walled Lake Northern High School

6000 Bogie Lake Rd

Commerce Township, MI 48382

**Brand Contact** 

**Universal Dance Association** 

800.DANCEUDA

Brand Website

AS DA:

hreyes@varsity.com

HS DA:

acreasey@varsity.com

REGISTER NOW

SHARE EVENT