## Franklin Public Schools Franklin, Massachusetts 02038

## **Action Required**

Subject:	Out of State/Overnight Travel	Date: Dept:	March 1 FHS	9, 2024
Reason:	Past practice of the Committee requires a vote to allow students/staff to travel outside of the State/Country	Enclos	sure	Yes

### Background

### **Recommendation:**

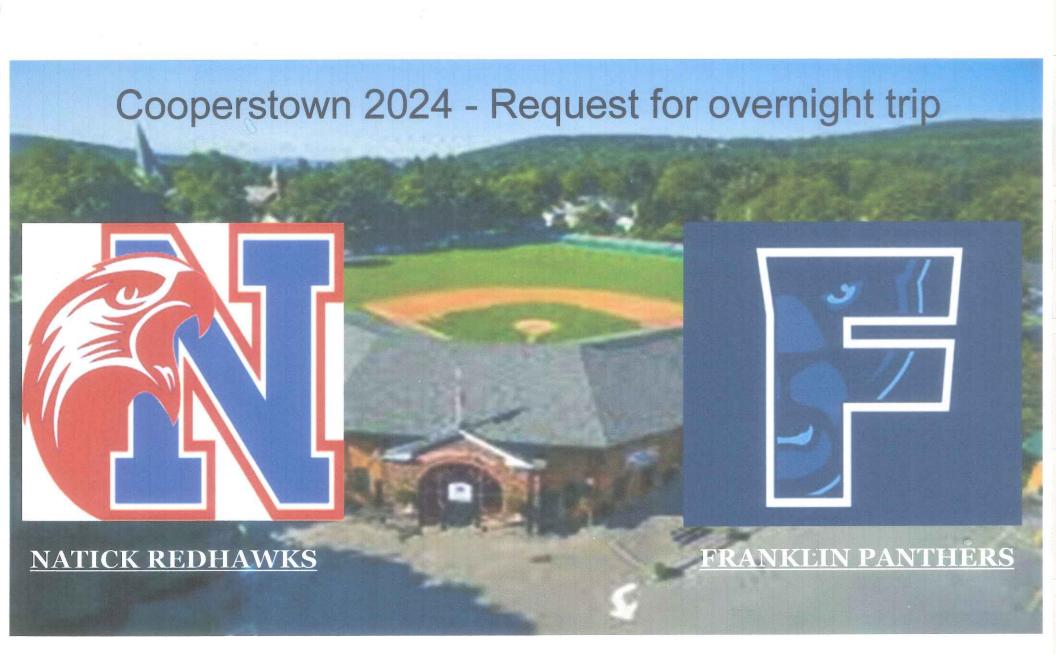
Recurring Cooperstown Field Trip

I recommend approval of the request of Karrah Ellis to take FHS Baseball team to Cooperstown, NY from April 14-15, 2024 to play against the Natick Redhawks as detailed.

### Action Requested of the School Committee:

Majority vote of the Committee is required.

Vote Tabulator				
E. Gallagher: Y	/ N	D. McNeill:	Y / N	
D. Callaghan:	Y / N	R O'Sullivan:	Y / N	
Al Charles:	Y / N	KP Sompally:	Y / N	
P. Griffith:	Y / N	Action:		



# **Purpose and Objective**

- To give student athletes an educational experience through a non traditional athletic setting
- Demonstrate and promote independence, responsibility, and respect while representing each school district
- The National Baseball Hall of Fame and Museum offers trips for students grades 3-12 that offer content rich experiences delivered in a structured setting.
- Student athletes will experience a one of a kind participatory (non MIAA competition) game at the historic Doubleday Field, widely considered "the birthplace of baseball."

## FHS and NHS Coaching Staff

- FHS staff has experience running this trip in the past (2018\* This season we won the Super 8 & 2022)
- NHS staff has experience running this trip in the past (2010, 2012, 2018, 2022)
- Both programs share similar goals, values, and high expectations for their student athletes
- Head coaches have a 20+ year baseball and personal history

# **Rough Itinerary**

## Sunday, April 14th 2024

- 7:30 am Both teams meet and board charter bus at Mahan field parking lot
- 8:00 am Bus departs Mahan field
- 12:00 pm 2:00 pm Arrive in Cooperstown,
  NY Lunch and souvenirs shopping
- 2:15pm Tour National Baseball Hall of Fame
  and Museum
- 4:00 pm Check in at hotel (BW Cooperstown)
- 5:30 pm Team Dinners (Both NHS & FHS)
- 7:00 pm Team Building Activity (Panic Room/Dessert)
- 9:00 pm Return to Hotel
- 10:00 pm Lights out and room checks

### Monday, April 15th 202 4

- 7:00 am 8:30 am Breakfast at hotel
- 8:45 am Depart for Doubleday Field
- 9:00 am Arrive and pregame
- 10:00 am 7 Inning joint intersquad with umpires (non MIAA)
- 12:00 pm 1:30 pm Lunch and last minute shopping
- 1:45 2:00 pm Board bus
- 2:00 pm Depart Cooperstown, NY
- 6:00 pm Arrive at Mahan field parking lot

# Anticipated Costs and Responsibility

FHS and NHS Baseball Programs will split the following costs;

- \$3300 Charter Bus
- \$1200-\$1400 Hotel rooms (appx \$100 per room X 12-14 rooms)
- \$500-\$600 Admission to HOF
- \$600-\$800 Teams dinner
- \$500 Rental of Doubleday Field
- \$150 Umpires

Total rough cost \$5,950 - \$6,450

Cost per team \$2,975 - \$3,225

Players and Coaches are independently responsible for the following costs:

- Sunday, April 14th Lunch
- Sunday, April 14th Souvenirs shopping
- Monday, April 15th Lunch and last minute shopping

# **Miscellaneous** Information

- Date could change based on field availability, but only forward or back a day
- Times could fluctuate slightly based on travel/length of game etc.
- Both teams will hold parent/player meetings at their respective schools closer to the date to review all information in detail, as well as team expectations

Adopted March 26, 2019

Original Waiver to Office of Superintendent

Copy to Building Principal

#### TRAVEL AUTHORIZATION FORM

A request for travel authorization and funding must be prepared at least 7 months in advance of the time the funds are needed for travel.

Requests shall be submitted by club advisors or other persons responsible for a student activity trip. The request shall be submitted to the Superintendent with the approval of the School Principal in accordance with policy IJOAA or IJOAB and shall abide by the Administrative Procedures for Student Travel.

Please	answer	all	questions
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Date of request:	Sumary, APAR 1470 - Monoral, Area 1574 2024
Date funds needed:	NIA - Dup PRODUCT WELL LOVER EXPENSES
Destination and purpose of trip:	COOTEASTOWN, NY BANESAU HAM OF FAME BOUSLOS EDMATLONAL
Estimated departure and return times:	4/17 730 m Debang - 4/15 6:37 In Remain
Number of persons traveling:	25
Estimate of cash required for tips and other various sundry items:	NIA - Dua houram were corea extenses
Estimate of expenses, inclusive of all costs:	NA - 11
Check Number and Date of Payment:	NIA - H
Signature of person requesting authorization:	Jain 3- WE ARE NOT REDYESTENT FUNDS

Adopted March 26, 2019

Signature of the School Principal authorizing the request:	
Signature of Superintendent* for out of state or extended field trips:	

\*Signature of Superintendent indicates recommendation to School Committee in advance of extended field trip.

#### TRIP INCOME AND EXPENSE REPORT

(Completed by Advisor, submitted to Principal's Office and submitted to Business Office) ACTIVITY NAME HIS VARIAN BISEDANADVISOR NAME AND BROWN GRADE(S) VARIANS JA. -SA. DATES OF TRIP 4/14 - 4/15 TRIP DESTINATION COOPERSTONNE, NY BASEBAN, Haust Fare

**EXPENSE DETAIL** 

#### **REVENUE DETAIL**

A R R C X X X X 100

(attach additional supporting documentation as necessary)

TOTAL COST OF BUSING	\$3,300	NUMBER OF STUDENTS ATTENDING	20-25
TOTAL ADMISSION COST	\$500-600	COST PER STUDENT	APT-11
I COSTS Light H.	4 1200 <sup>6</sup> 1401	(A) TOTAL COLLECTED FROM STUDENTS	SO - STUDENTS 124 For 2 LINGLADS
TEAM DENNION Newton Densue Day	1 600 - 1 900 4 600 1 150	NUMBER OF STUDENTS SUBSIDIZED BY PRINCIPALS ACCOUNT	& NA
Unicres	15,9Kb - 6,4Kb	(B) TOTAL DUE FROM PRINCIPAL'S ACCOUNT	ø Nla
TOTAL COST OF TRIP	529.2543,225	TOTAL REVENUE (A+B)	Ø NA

\* THEAT IS WI NATCHAN H.S. VAASCH BASE BASE MAKENAM AS WEN, WE TEVERE THE LOSTS DETAIL OF PAYMENTS FOR THIS TRIP

CHECK DATE CHECK NUMBER VENDOR PA

	CHECK DATE	CHECK NUMBER	VENDOR PAID	AMOUNT
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160.0	***************************************		TOTAL	

#### DETAIL OF DEPOSITS FOR THIS TRIP

DAT	TE OF DEPOSIT	DEPOSIT PREPARED/SUBMITTED BY	AMOUNT	

Adopted March 26, 2019

TOTAL AMOUNT DEPOSITED (MUST EQUAL TOTAL COST OF TRIP):	\$
ADVISOR'S SIGNATURE Juch J	
PRINCIPAL'S SIGNATURE	DATE

**RETAIN A COPY OF THIS FORM FOR YOUR RECORDS**