

MAJESTIC WAY PTA FIELD TRIP PAYMENT FORM

FIELD TRIP INFORMATION:

Requestor Name: _____

Field Trip Name &: _____

Location _____

Date of Field Trip: _____

What grade levels will participate in the field trip? _____

Is this request for: payment of buses entrance fees deposit for field trip Other: _____

Will you collect money from the students/families for this field trip to reimburse the PTA? Yes / No

If yes, how much are you requesting from the student? _____

If this form is being used to cover multiple teachers, how should the PTA allocate the dollar amounts? *(Please list teacher name & dollar amount that should be deducted from their budget):*

Teacher Name	Dollar Amount

PAYMENT INFORMATION:

Make check payable to: _____

Address: _____

Amount to be paid: _____

Date of when check must be received: _____

Do you need the PTA to *(check one box)*: mail the check OR return the check to the requestor

For PTA Treasurer use ONLY:

Date of Check	Check Number	Amount of Check

President's Signature: _____ Date: _____

Treasurer's Signature: _____ Date: _____