

**C&S Events Form**

**Trip Registration and Activity Form**

| Club/ Society Information | |
| --- | --- |
| **Club/ Society Name** |  |
| **Club/ Society Event / Trip** |  |
| **Description of Event** |  |
| **Date(s) of Event** |  |
| **Club/ Society Primary Organiser** |  |
| **Club/ Society Contact Number** |  |
| **Club/ Society Contact Email** |  |
| **Number in Attendance / Travelling** |  |
| **Number of First Years** |  |
| **Number Under 18** (Must be 0 for Society foreign trips) |  |

| Club/ Society Main Group Leaders | | | | | |
| --- | --- | --- | --- | --- | --- |
| **First Name** | **Last Name** | **Address** | **Email** | **Phone Number** | **Committee**  **Position** |
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| Important Contact Information   * Must include Society/ Club Group Leaders * Must include Hotel / Hostel * Must include Irish Embassy at Destination * Must include all known details of activity location(s) e.g Group activities and Restaurants | | |
| --- | --- | --- |
| **Name** | **Contact Number** | **Address** |
| **Clubs and Socs** | 00353-1-700-8436 | DCU |
| **DCU Security 24/7** | 00353-1-700-8990 | DCU |
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| Summary Dates & Times | | | | |
| --- | --- | --- | --- | --- |
| **Key Points** | **Destination** | **Time** | **Date** | **Flight Number**  **(if applicable)** |
| **Depart** | **DCU** |  |  |  |
| **Arrive at Destination** |  |  |  |  |
| **Depart Destination** |  |  |  |  |
| **Return** | **DCU** |  |  |  |

| Transport | | | |
| --- | --- | --- | --- |
| **Type** | **Company** | **Contact Number** | **Details** |
| **Coach/ Mini Bus** |  |  |  |
| **Private Car** |  |  |  |
| **Train** |  |  |  |
| **Other:** |  |  |  |
| **Type** | **Airline** | **Flight Number(s)** | **Details** |
| **Flight** |  |  |  |

| Student & Next of Kin Information | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Trained in First Aid**  **(Yes/No)** | **Student Number** | **Phone Number** | **Name of Next of Kin** | **Next of Kin**  **Emergency Contact Number** | **First Year**  **(Yes/NO)** |
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| Activities and Daily Itinerary   * Please fill out in chronological order * Include all planned activities * Include all known Locations and Addresses * Include any additional known cost in the “Additional Information” section .e.g Public Transport | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Start Time** | **Activity** | **Location & Address** | **Contact Number** | **End Time** | **Additional Information** |
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| Spending Money   * Please provide a breakdown of any additional money people will be required to spend due to any organised trip activities. * E.G. Public Transport, Entry Fees, Club Entry etc. | | | |
| --- | --- | --- | --- |
| **Date** | **Activity** | **Amount** | **Additional Information** |
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| Safety & Buddy System   * One Group Leader must be in responsible for 3 other group members on the trip. * Must do head count must be done in the morning, following group activities and in the evening. | | | |
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| **Group Leader** | **Person Number 1** | **Person Number 2** | **Person Number 3** |
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| Checklist | | | |
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| **Task** | **Committee Member Responsible** | **Additional Information** | **Complete**  **(Yes/No)** |
| Your Society has met with Siobhan Byrne and C&S Events Administrator |  |  |  |
| Completed and Submitted a Complete C&S Events Form #4: Trip Itinerary |  |  |  |
| Confirmed Numbers traveling |  |  |  |
| Copied all Passports in a google drive |  |  |  |
| Paid Accommodation in full before departure |  |  |  |
| Recommended to all students' to purchase personal travel insurance |  |  |  |
| Have Emergency Contact Details Card for all traveling |  |  |  |
| Downloaded the Safe Zone App and issued card to all traveling |  |  |  |
| Submitted Organisers and Leaders contact details |  |  |  |

| Checklist Sign Off | | |
| --- | --- | --- |
| **Name** |  |  |
| **Position** |  |  |
| **Student Number** |  |  |
| **Contact Number** |  |  |
| **Date** |  |  |

**All of the above must be submitted before traveling with the DCU Clubs and Socs Trip Itinerary.**