

Departure Time:

Return Time:

Credit Card __

Cash __

Charge __

Name of Organization _____

ATTENDEES' LIST & MEAL WORKSHEET SEAGRAVES ISD

This worksheet is to be prepared for ALL Student Travel Requests!

This list applies to the Student Travel Request for:

Contest: _____

Date: _____

	Seagraves ISD Employees	# Breakfast	# Lunch	# Dinner	Receipt Initials
1					
2					
3					
4					
5					
Totals					
	Seagraves ISD Students	# Breakfast	# Lunch	# Dinner	Receipt Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Totals					

I certify the students listed above are eligible to participate in activities according the Senate Bill 1.

Teacher/Sponsor: _____

Date: _____

Approved By:

Date: