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|  | **TRIP FORM** |  |

**CLUB/SOCIETY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DESTINATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ACTIVITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TRIP LEADER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DEPARTURE DATE & TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RETURN DATE & TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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|  | **PARTICIPANTS NAME** | **STUDENT NUMBER**  **Or next of kin**  **telephone number** | **First Aider**  **Please tick box** | **Leading Role**  **Please tick box** |
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