Dear Trip Leader,

Congratulations! You have taken on an important responsibility by agreeing to serve as a Trip Leader. In addition to having fun, I hope you learn a lot from this experience. Accepting this position of leadership in your group means others rely on you to be organized and detail oriented. A number of people on campus are available to assist you in this endeavor – your organization’s advisor, the Campus Activities Office, Club Sports and the Dean of Students office to name a few.

Just like the students who will be participating in this trip, I want you to enjoy your travels. I also want you to be safe. To that end, the College has put into place this Travel Plan packet and asks that you read all materials and complete all forms.

Each participant going on the trip must fill out a “Gustavus Student Organization-Sponsored Trip Student Participation Emergency Information Form”. The Trip Leader must also fill out the “Gustavus Student Organization-Sponsored Trip Itinerary and Master Contact Form”. Once completed, these sheets should be turned in at the same time at the Dean of Students Office. Turn in all paperwork at least 5/10/30 days (depends on length of travel) before departure.

Thank you in advance for your work on this paperwork portion of your trip. Please do not hesitate to contact me if I can be of further assistance to you in your planning process.

Sincerely,

Debra Swanberg
Administrative Assistant
Dean of Students Office

507-933-7526
dos@gustavus.edu
Travel Policy for Recognized Student Organizations

The following conditions apply to recognized student organizations for all travel to and from off-campus events and activities. This policy is meant to help ensure student safety during travel and allow for protection of organizations while away from Gustavus. Student organizations are expected to plan ahead, show environmental stewardship, and represent Gustavus in every aspect of their travel. This policy is in effect year-round, including breaks and summers.

General Travel Requirements
a. Mileage does not include distance between destinations within the same town/city.
b. In any case in which students are traveling in an individual’s personal vehicle, the individual’s auto insurance will be the primary coverage to which claims are made.
c. College vehicles may only be used by student organizations for travel that an advisor has approved by means of his/her signature on the vehicle reservation form.
d. At least one student, advisor, or proxy in every vehicle must have a cell phone.
e. Organizations may amend their plans at the permission of their advisor, but no later than one day before the scheduled leave time.
f. Student Organizations will not be approved to travel between the last day of classes and last day of final exams during any semester.
g. Any decision regarding travel or desired divergence from policy may be appealed to the Dean of Students’ Office

Travel Plan: Any travel taking more than one vehicle, or over 150 miles roundtrip, or overnight must have a Travel Plan. All Travel Plans must be completed and turned into the organization’s advisor for review no less than five business days before the trip begins. Because some travel plans require extra planning to ensure safety:
a. Any travel over 60 miles roundtrip (considered a “full day of travel”), OR more than one night away from campus, OR with more than 20 travelers must turn in a Travel Plan at least ten business days before the trip begins.
b. Any travel over 1,000 miles roundtrip must turn in a Travel Plan at least a month before the trip begins.

Advisor Supervision: All travel must be communicated to advisors prior to leaving, including the names of travelers, destination, and emergency contact information. If travel requires a Travel Plan, the advisor must further supervise the trip in one of the following forms:
a. By traveling with the organization in person
b. By appointing a staff/faculty proxy to travel with the organization in person
c. Long-distance via phone
d. Phone contact must happen on a predetermined schedule; the following schedule is recommended: on arrival to the destination, each evening of an overnight stay, and on arrival back at campus.

e. Methods for notifying advisors of emergency situations must be planned before departure; emergency situations include serious illness or injury, inclement weather, automobile accidents, etc.

**Modes of Transportation:** All travel must be in college-owned vehicles, in rented vehicles, or through licensed commercial carriers (buses, airlines, etc.), UNLESS the travel is less than 400 miles round trip, is completed within a single day, and is accommodated by a maximum of five personal vehicles. In the event a personal vehicle is used, the owner of that vehicle accepts responsibilities and liability for any and all activity during the trip.

a. **Individual Deviations:** Organizations must travel together; any individual deviations must be documented in the Travel Plan.

b. For travel that is less than 400 miles roundtrip, deviations cannot account for more than 30% of the travelers.

c. For travel between 400 and 750 miles roundtrip, deviations cannot account for more than 20% of the travelers.

d. There may be no deviations for travel over 750 miles roundtrip.

*Revised July 2013*

See Guidelines for the Implementation of College Alcohol and Drug Policies for Student Groups Traveling Off-Campus for specific policies relating to the use of alcohol and drugs when traveling off campus.
Other Suggestions for Student Organization-Sponsored Trip Leaders

Prior to the Trip:
- Distribute the travel itineraries to all participants and encourage them to give copies to parents/guardian
- Discuss behavioral expectations for all group participants.
- Review safety precautions for the trip and talk as a group about safety prevention.
- Collect emergency contact information from each participant and complete other trip information forms. File all materials with the Dean of Students Office.
- Maintain emergency information for each participant, for the duration of the trip, that is accessible to trip leaders.
- Arrange to have a mobile phone with you on the trip.
- Gather local (trip destination) resources for emergency use (hospital, police, etc.).
- Talk as a group about the goals of the trip and encourage individuals to invest in getting the most out of the experience.

During the Trip:
- If traveling in multiple vehicles, set designated meeting places in case you are separated. Have a set of travel directions in each vehicle. Don’t assume that you will be able to stay together in a caravan—this can be especially tricky in heavy traffic.
- Use a buddy system (especially in large groups) to make sure all are present.
- If the group splits, up, make sure everyone knows the meeting place and time.
- Upon arrival at your destination, pick up a city map to help orient the group to the area (Chamber of Commerce offices or Visitor Centers are generally helpful).
- Make it a practice for all group members to inform someone of their plans before leaving the group.
- Acquaint all group participants with agreed upon safety parameters.
- Have check-ins at specific times to assure that everyone is present.
- Have a backup plan in place and make sure everyone knows what it is.
- Notify appropriate people (Dean of Students Office, parents) if your schedule changes. This includes early returns, delayed departures, etc.

After the Trip:
- Notify your advisor that you have returned to campus.
- Share with the larger community how this trip benefited your group and what you learned or gained from the experience.
- Sponsor a session for group participants to reflect and debrief (contact the Campus Activities Office).
Emergency Information for Student Organization-Sponsored Trips

Gustavus has developed a Management Plan for aiding groups in need of assistance while away from campus on student organization-sponsored trips. Contact the Dean of Students in any of the situations listed below:

- Serious illness, injury or death.
- Emotional or psychological stress that appears to require removal from the situation or professional attention.
- Member of group is victim of a crime—theft, assault, rape, harassment, etc. or is accused of committing a crime.
- Natural disaster at the location the group is at or traveling to.
- A situation in-country arises that causes serious concern, i.e., a political uprising.

While it is likely that you and others in your group will be upset/emotional during an emergency, it is critical that you follow the instructions provided by the Dean on Call (available 24/7 by calling 507-933-8888 and asking to speak to the Dean on Call)

Responsibilities for the Trip Leader:

- Contact the appropriate local authorities (police, medical personnel, US Embassy) to begin the local action necessary to handle the emergency.
- Remove the group participants from danger.
- Contact the Dean of Students 507-933-7526; or 507-933-8888 if outside the hours of 8am-5pm
- Gather other participants and inform them of the emergency (if appropriate).
- Write down and save all pertinent names and information to refer to or pass on later.

**EMERGENCY PHONE NUMBERS**

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campus Safety (answered 24/7)</td>
<td>(507) 933-8888</td>
</tr>
<tr>
<td>Dean of Students</td>
<td>(507) 933-7526 – Office</td>
</tr>
<tr>
<td></td>
<td>(507) 933-6526 – Fax</td>
</tr>
<tr>
<td></td>
<td>E-mail: <a href="mailto:dos@gustavus.edu">dos@gustavus.edu</a></td>
</tr>
<tr>
<td>Dean of Students On Call</td>
<td>(507) 933-8888</td>
</tr>
<tr>
<td>(after business hours)</td>
<td></td>
</tr>
<tr>
<td>Gustavus Health Service</td>
<td>(507) 933-7630</td>
</tr>
<tr>
<td>Gustavus Counseling Center</td>
<td>(507) 933-7027</td>
</tr>
<tr>
<td>Gustavus Chaplains Office</td>
<td>(507) 933-7446</td>
</tr>
</tbody>
</table>
Gustavus Student Organization-Sponsored Trips
Trip Itinerary and Master Contact Form

The information requested below will be used in case of emergencies and is limited to the duration of the Gustavus Student Organization-sponsored trip.

Date Submitted: ____________________
Organization/Club: ____________________________
Organization/Club Advisor: ____________________ Traveling with Group?: Yes No
Trip Leader: ________________________________ Mobile Phone: __________________________
Nature of Event (conference, competition, etc.): ____________________________
Destination: ________________________________ Roundtrip Mileage: _______________
Trip Dates: ________________________________ Number of Students Participating: _____
(City, State)
Departure Date, Time: ____________________________
Return Date, Time: ____________________________

1. Transportation:
Will you be using College-owned vehicles? Yes No
Type and Number: __Automobiles __Mini Vans __10-passenger Vans
Are you contracting with a commercial carrier? Yes No
If yes, list the name and phone number: ____________________________
If you are planning to use personal vehicles, list each driver (max of five vehicles):
Driver #1: ____________________________ Cell ph #: __________________ # of passengers: _____
Driver #2: ____________________________ Cell ph #: __________________ # of passengers: _____
Driver #3: ____________________________ Cell ph #: __________________ # of passengers: _____
Driver #4: ____________________________ Cell ph #: __________________ # of passengers: _____
Driver #5: ____________________________ Cell ph #: __________________ # of passengers: _____

2. Trip Itinerary:
ATTACH A DETAILED PLAN OF TRAVEL including specific information about each day’s activities, hotel/motel and other lodging, contact person/host name(s) and telephone number(s), etc. IF YOUR ADVISOR is not traveling with your group, include a schedule of intended contact throughout the course of your trip.

3. Roster of Participants:
ATTACH A ROSTER of all students and guests who will be participating.

Student Leader Signature: ____________________________ Date: ________________
Advisor Signature: ____________________________ Date: ________________
Dean of Students Signature: ____________________________ Date: ________________
Gustavus Student Organization-Sponsored Trips

Student Participant Emergency Information Form

The information requested below will be used in case of emergencies and is limited to the duration of your participation in a Gustavus Student Organization-sponsored trip. 

**EACH** Gustavus student going on the trip must complete this form.

Organization: __________________________________________________________

Trip Destination: _______________________________________________________

Trip Dates: _____________________________________________________________

Student Name: _________________________________________________________

Student ID#: __________________________________________________________

Student Cell Phone #: __________________________________________________

Home Address: _________________________________________________________

Home Telephone: _______________________________________________________

**EMERGENCY CONTACT INFORMATION:** (CANNOT be the name of someone on the trip with you)

Contact Name: _________________________________________________________

Relationship: __________________________________________________________

Address (City/State): ____________________________________________________

Phone # (to be reached all hours): _________________________________________

E-mail: _________________________________________________________________

Additional information you wish us to know (include medical conditions/medications)

_____________________________________________________________________

_____________________________________________________________________

Please provide the following information if you have a non-Gustavus student who is attending the trip with you (Banquet Date, Etc)

Guest Name: ___________________________________________________________

Guest Cell Phone#: _____________________________________________________

Guest Home Address: ____________________________________________________

Guest Emergency Contact Name: _________________________________________

Guest Emergency Contact Phone #: _______________________________________

I give Gustavus Adolphus College permission to contact the above listed emergency contact in case of an emergency.

_____________________________________________________________________

Student Signature Date
Gustavus Adolphus College Agreement and Release of Liability

(Read carefully before signing)

The undersigned registrant represents and agrees as follows:

1. __________________________ (“registrant”) is a participant in an off-campus program of which
Gustavus Adolphus College is a sponsor.

   __________________________   __________________________
   (Date of Birth)               (Student ID Number)

2. The Registrant has voluntarily enrolled in the program outside the city of St. Peter (“Program”).

3. The registrant is aware that the use of transportation, housing, safety and maintenance of buildings,
equipment, public places, and conveyance; local medical delivery; weather conditions, dining services,
and other goods and services in connection with participation in the program carries a risk of
personal injury and property damage or loss that may result from the participation in the program
and use of the goods and services described above. Further, the registrant understands that
participation in the Program involves risks not found in study at the College.

4. The Registrant hereby RELEASES AND DISCHARGES the College, and their officers, directors,
faculty, agents, employees, facilitators and legal representatives (“the Released Parties”) from any
liability, injury, damage, or loss ARISING OUT OF THE AFOREMENTIONED RISKS or arising
out of any other activity incident to the Registrant’s participation in the Program, including any losses
CAUSED BY NEGLIGENCE of the Released Parties. The Registrant does not release the College
from liability for willful or intentional acts of punitive damages.

5. The Registrant understands that the College does not represent or act as an agent for, and cannot
control the acts or omissions of: any transportation carrier, hotel, or other provider of goods or
services involved in the Program. The Registrant understands that the College is not responsible for
matters that are beyond its control. The Registrant does hereby release the College from any injury,
loss, damage, accident, delay or expense arising out of any such matters.

6. The Registrant understands that during free time (both within and following the period of the
Program) elective independent travel occurs at the Registrants own expense. At such times, the
registrant is acting as an independent agent and accepts sole responsibility for his/her own well-
being. The College is not responsible for any injury or loss suffered when the Registrant is traveling
independently or when otherwise separated or absent from any College-sponsored activities.

7. The Registrant also agrees NOT TO SUE OR MAKE A CLAIM AGAINST THE RELEASED
PARTIES for injury, damage, or loss sustained a s a result of participation in the Program and use of
the goods or services described above. The Registrant will indemnify and hold harmless the Released
Parties from all claims, judgments, and costs, including attorney’s fees, incurred in connection with
any action.

8. The Registrant further agrees to abide by all applicable rules and regulations of the College, and the
laws of the governmental jurisdictions at the place or places of Program offering. The Registrant
agrees to indemnify and hold harmless the Released Parties form all claims or losses resulting from
the Registrants failure to abide by such rules and laws.

That by executing and signing this agreement I attest to the fact that I have read this Agreement and Release
of Liability form carefully and understand the contents of this document, and have had the opportunity to ask
questions as to the nature of the document I have signed. I sign this document of my own free will.

_____________________________     __________________________
(Signature)                     (Date)