**Leeds University Union**

Trip Safety Form

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**To be completed and submitted a minimum of three weeks before your trip. Updated information should be emailed/handed in to your trip contact before the trip.**

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| --- | --- |
| **Name of Group** |  |
| **Name of Organiser** |  | **Committee Position** |  |
| **Contact Email** |  | **Contact Mobile** |  |

|  |  |
| --- | --- |
| **Trip Details** (Activity) |  |
| **Objectives of Trip** |  |
| **Destination(s)** |  |
| **Itinerary** (include contingency plan) |  |
| **Type of Trip** (tick) | **Sports Match** |  | **Club Trip** |  | **Social** |  | **Other** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Departing Leeds** (Date/Time) |  | **Returning to Leeds** (Date/Time) |  |

|  |  |
| --- | --- |
| **Transport** (driven, self drive, public transport- please list) |  |
| **Accommodation Details** (if applicable: name, address, contact number) |  |

**Please ensure you provide the Union with a Risk Assessment for your trip.**

**If you are running a social, please ensure you have a list of leaders that aren’t drinking on the social and you supply the Union with this list of people.**