

INNER CITY OUTINGS TRIP REPORT FORM

Send this form by email or mail within one month of your outing to:

Trip Date _____ Trip Location _____ Type of Outing _____

Agency _____ ICO Trip Leader _____

Email _____ Phone _____ Total Outing Cost \$ _____

Total number of Certified Leaders on trip _____ Names _____

Total number of volunteer hours _____ (include time for all volunteers for pre-trip, trip & post trip)

Were Agency staff on trip? _____ If so, list agency staff names: _____

Total # youth on trip _____ Age range _____ Number females _____ Number males _____

Total number of Youth Leaders on trip _____ Total number of Adult Participants on trip _____

Ethnicity of group:

African-American _____ Caucasian _____ Hispanic _____

Native American _____ Asian _____ Other _____

Were there injuries on the trip? If so, how were they handled? Is follow-up needed?

Were there any other problems or issues that arose on the trip? If so, how were they handled? Is follow-up needed?

What activities did you do on this trip?

What should future trip leaders know about this outings location?

Would you do this trip again? If not, explain why not.

What was the response from the trip participants? (Quotes are great!)

ADDITIONAL COMMENTS: Please use back of form for additional comments, quotes, and trip stories.