Once completed, please submit this form to the relevant Division Principal and the Director of Experiential Education/Risk Management- [jwillis@chadwickschool.org](mailto:jwillis@chadwickschool.org). This form should also be shared with all Chaperones.

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| OVERVIEW (Insert rows throughout as needed) | | | | | | | |
| **EVENT NAME:** |  | | | | | | |
| **DATE(S):** |  | | | | | | |
| **PURPOSE:** |  | | | | | | |
| **NUMBERS:** | Total people on campus: Total adults: Total students: | | | | | | |
| **GUESTS:** | Are any non CI participants attending? YES/NO (If yes, please include details below) | | | | | | |
| FACULTY/CHAPERONES | | | | | | | |
|  | | **NAME** | | | **MOBILE #** | | |
| **FACULTY LEADER:** | |  | | |  | | |
| **CHAPERONE:** | |  | | |  | | |
| **CHAPERONE:** | |  | | |  | | |
| **CHAPERONE:** | |  | | |  | | |
| **CHAPERONE:** | |  | | |  | | |
| EMERGENCY INFORMATION | | | | | | | |
| IN THE EVENT OF AN EMERGENCY, PLEASE ACCESS THE PORTAL FOR STUDENT EMERGENCY CONTACT DETAILS | | | | | | | |
| NEAREST HOSPITALS: GIL Hospital- 1198, Guwol-dong, Namdong-gu, Incheon: General phone- 1577-2299  Red Cross Hospital-580-3, Yeonsu-dong, Yeonsu-gu, Incheon: General phone- 032-899-4000 | | | | | | | |
| EMERGENCY NUMBERS: Fire, Emergency and Ambulance- 119 Police- 112 | | | | | | | |
| **STUDENT PARTICIPANT INFO** | | | | | | | |
| **Total number of students participating:** | | | | | | | |
| **Grade level(s) of students:** | | | | | | | |
| **STUDENT NAME** | | | | **GRADE** | | **STUDENT NAME** | **GRADE** |
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| SCHEDULE | | | | | | | |
| **DATE:** | | | **ACTIVIITIES** | | | **LOCATIONS ON CAMPUS** | |
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| **CONTACTS** | | | | | | | |
| **CI EMERGENCY CONTACT INFORMATION:** | | | **Shelly Wille- Head of School- 010 7123 6531** | | | | |
| **Craig Williamson- Asst Head of School- 010 7123 1668** | | | | |
| **Jen Willis- Director of Experiential Ed- 010 4796 3697** | | | | |
| **Russell McGrath- US Principal- 010 5163 6008** | | | | |
| **Connie Kim**- MS Principal- 010 9659 8222 | | | | |
| **Julian Taylor- VS Principal- 010 3394 0913** | | | | |
| **CI Security- 032-250-5082** (Gate 2 phone) | | | | |
| **NON CI PARTICIPANTS** | | | | | | | |
| **NAME/Age** | | | | **School/**  **Orgnaization** | | **NAME/Age** | **School/**  **Orgnaization** |
|  | | | |  | |  |  |
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| **MEDICAL INFORMATION- are there any significant concerns chaperones must be aware of?**  EG- Allergies, medical conditions, physical limitations? | | | | | | | |
| **NAME** | **CONDITION** | | | | | **TREATMENT** | |
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