

Society Trip Authorisation Form

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| --- | --- |
| Society Name |  |
| Title of Trip |  |
| Duration *(include the day leaving and return date)* |  |
| Approx number of members travelling  | Min:Max: |
| Types of Travel *(include all types ie air, rail or bus etc)* |  |
| Location *(include details and addresses of all towns and areas being visited and stop-overs en-route with dates)* |  |
| Purpose of Trip*(brief description of the activity/work being undertaken)* |  |
| Organiser Details*(Name and contact details of at least two trip organisers)* |  |
| Society President Authorisation  | Signature :Date : |

**Funding for Trip**

Please state where funds are coming from for trip (include amounts)

|  |  |
| --- | --- |
| Alumni Funding |  |
| Grant Funding |  |
| Society Savings Account |  |
| Student/Society member contribution (also state total cost for individual member) |  |
| Other source |  |
|  **Total cost of trip** |  |

**Executive Authorisation**

|  |  |
| --- | --- |
| Exec Name : |  |
| Signature : |  |
| Date : |  |

Once completed please return this form to a member of Student Engagement Staff, [strathunion.societies@strath.ac.uk](strathunion.societies%40strath.ac.uk)