



**DIOCESE OF PATERSON:
TRAVEL REVIEW FORM:**

Use this form when planning overnight travel involving minors. Please fax/ email/mail this form to the appropriate Pastoral Center Office (Department of Catholic Schools; Department of Youth/Young Adult Ministry, Religious Education, as well as the Office of Risk Management) before finalizing travel arrangements.

Parish/School: _____

Address: _____

City, State/Zip Code: _____

Contact Person: _____

Phone Number: _____ Fax Number: _____

Description of Proposed Trip: _____

Dates of Trip: Start: _____ End: _____

Number of Minors: _____ Ages: _____

Number of Chaperones/Supervisors: _____

Mode of Transportation: _____

Religious/Educational Goals of the Trip: _____

The Pastor/Principal/Agency Director is responsible for ensuring that travel arrangements are in accordance with the Policy on Travel Involving Minors.

Signature of Pastor/ Principal

Date

Signature of Contact Person

Date