| **Trip Information** | |
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| **Form submission date** |  |
| **Form revision date** |  |
| **Trip leader name** |  |
| **Contact phone# & email** |  |
| **Co-leader name** |  |
| **Trip name** |  |
| **Trip dates** |  |
| **New TBN trip or resurrection of an old trip** |  |
| **Scouting**  **(e.g. routes, lodging, etc.)** |  |
| **Scouting costs (estimate)** |  |
| **Van**  **(e.g. luggage, support)** |  |
| **Van driver** |  |
| **Location**  **(specify start and finish location if different)** |  |
| **In co-operation with (organization name)** |  |
| **Name & address of venue**  **(if only one for entire trip)** |  |
| **Trip itinerary** |  |
| **Advance deposit amount and date(s) for venue(s)** |  |
| **Style of lodging**  **(e.g. cabins, motel, campsite, university residence)** |  |
| **Meals**  **(e.g. pot luck, group at restaurant, self-provided)** |  |
| **Estimated cost** |  |
| **Included in cost** |  |
| **Optional extras** |  |
| **Payment schedule for participants** |  |
| **Transportation to/from start/finish** |  |
| **Maximum # of participants** |  |
| **Minimum # of participants** |  |
| **Primary activity**  **(e.g. cycling, skiing, hiking)** |  |
| **Other activities** |  |
| **Level**  **(e.g. distance, pace, terrain, TBN ride category)** |  |
| **Bike storage options**  **(e.g. in motel room, locked garage)** |  |

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| **Trip Leader Information** |
| *Prerequisites for consideration as a trip leader:*   * *A member of TBN in good standing* * *Have an email account, voice mail, printer, Microsoft Office software. Ability to scan documents is nice to have.* * *Knowledgeable in use of Microsoft Office software (Excel, Word)* * *Comfortable with basic record keeping* * *Have good organization skills* * *TBN or relevant experience in organizing trips or events* |
| **Have you attended the TBN Ride Leaders Clinic? What year?** |
| (enter your text here) |
| **Describe your experience organizing or leading rides, trips and events either for TBN or other organizations. Include the name of the event, year, your role and name of the primary trip leader.** |
| (enter your text here) |