Tour Leader's Emergency Check List

For **EMERGENCY** situations, please compile the following information and return to the Student Development Center (A003) **at least one week before** the trip takes place.

This information will be put into an EMERGENCY book and copies given to Delta College - Department of Public Safety, Switchboard, and Vice President

Trip Destination_____

Delta Tour Leader (1)_____

Delta Tour Leader (2)_____(3)_____

Number of Participants _____

Dates of Trip:

Departure_____(a.m.)(p.m.)
Day of Week Month Date Year Time

Carrier_____Flight Number(s)_____

Airports_____
from to

Return_____(a.m.)(p.m.)
Day of Week Month Date Year Time

Carrier_____Flight Number(s)_____

Airports_____
from to

Tour Company / Travel Agent Information:

Company Name_____

Contact Person_____Phone: _____

Company Address_____

_____

Attachments:

(1) **FINAL Revised Itinerary** — listing phone numbers of hotels/lodging, if available.

(2) **List of Participants —** phone numbers, addresses
* Emergency contact person(s) and phone numbers

(3) **Photocopies** of participants Student Information Sheets & Passport (page with photo and participant info)

(4) **Class List —** of students in academic course