

**Field Trip Reimbursement Form**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School District Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please fill out all that apply below and return this form to the Trust within 5 business days after your field trip. **The maximum reimbursement is $1,500.00.**

**Costs**

The total cost of our bus(es) was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Attach a receipt or equivalent document

The total cost of our meals was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Attach a receipt

The total cost of admission was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Attach a receipt or equivalent document

The total cost of our presenters/guides was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Attach a receipt or equivalent document

The total cost of our field trip was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reimbursement Checklist**

* I have filled out my Field Trip Fund reimbursement form completely.
* I have attached all of my receipts.
* I have taken and submitted at least five rights-free photos of my field trip.
* I have submitted a rights-free thank you video of my students on the field trip.

Choose one way to submit everything to the Civil War Trust:

* E-MAIL EVERYTHING TO: fieldtripfund@civilwar.org
* MAIL EVERYTHING TO:  **Field Trip Fund**

 **Civil War Trust**

 **1156 15th St. NW Suite 900**

 **Washington D.C. 20005**

* FAX EVERYTHING TO: **Field Trip Fund** at **202-367-1865**