Office Use:

 Travelling via: ……………………………..

 Order ref: ……………………………………

**Registration Pack - Trip & Event**

Trip/Event activity……………………………………………………..........................

Club/Society/Project name………………………………………………………………

Trip packs must be submitted to HUU at least one week in advance failure to do so could result in your event/trip being cancelled. International trips require 4 clear weeks’ notice

|  |
| --- |
| **Section 1: Trip/Event General Information**Start Date………………………… Return Date…………………………Start Time………………………... Return Time………………………...Key event organisers/Leaders:Name………………………………Contact No: …………………………Name………………………………Contact No: ………………………… |

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| --- |
|  **Office use only** Date trip pack received………………………………………………… Approved Not Approved  Approved by: SC/SAC/FM ……………………………………………….  Date approved………………………………………………….................. |

|  |
| --- |
| **Section 2 : Venue/Destination Information**Venue/Destination…………………………………………………………………Address ………………………………………. ………………………………………. ………………………………………. ………………………………………. Post code…………………….......Venue/Destination contact number (including area code)………………………… |

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| --- |
| **Section 3: Trip/Event Itinerary** Please provide a detailed list of the main activities with timings and include any equipment that you will also be transporting.…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..………………………………………………………………………………………………………………………….. |

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| **Section 4: Travel Arrangements**How will you be travelling to your destination? Self-Drive 9 seater (Fill in section 5 & 6) On foot   Coach (Fill in section 5) Taxis  Own car (Fill in section 10) Public transport  Other – Please specify ……………………………………….  For Multiple modes of transport tick all relevant boxes |

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| --- |
| **Section 5: Transport Details**Date transport required:Start……………………………………… Finish …………………………………………..Departure time (from campus)……………………………………………………………….Return time (to campus)……………………………………………………………………..Transport required: Beerhouse self-drive up to 9 persons  Coach – Please state how many people are going ………………………………… |

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| **Section 6: Trip and driver details**Distance from University (approx.)……………………………………\*If the destination is outside a 30 mile radius of the University you will need 2 drivers**Driver 1 name** ………………………………………………………Contact number ………………………………………………………..HUU minibus licence no……………………………………………….**Driver 2 name**………………………………………………………….Contact number …………………………………………………………HUU minibus licence no………………………………………………. |

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| --- |
| **Section 7: Health & safety** Has a Risk Assessment for the activity been submitted Yes NoA Risk Assessment for your activity is required before your trip/activity goes ahead.If you need any further assistance please ask your Co-ordinatorName of First Aider………………………………………………………………Are you taking a First Aid Kit Yes No  If no what First Aid Provision are you taking ………………………………...... Will there be any additional First Aiders on site? Yes NoIf yes who will this be ………………………………………………………....... |

**Section 8: Participant List**

(Please enter the names of all individuals who are taking part in the activity – **this should also include the group/trip leaders**) *All 3 fields need to be completed in full*

|  |  |  |  |
| --- | --- | --- | --- |
|  | First name | Surname | Student Number |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
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| 34 |  |  |  |
| 35 |  |  |  |

* Student numbers must be provided. Your trip pack will be returned to you and the event/trip will be cancelled if the information is not provided
* Please request an additional sheet if you will have more than 35 participants

**HUSSO Volunteering projects only**

**Section 9: HUSSO Participant List**

Please ensure that all participants (or their parents/carers) have been contacted in advance and have confirmed their attendance

|  |  |  |  |
| --- | --- | --- | --- |
|  | Participant First Name | Participant Surname | Age |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
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| 12 |  |  |  |
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| 17 |  |  |  |
| 18 |  |  |  |
| 19 |  |  |  |
| 20 |  |  |  |

\*All participants must be registered with the Volunteering Hub.

If consent/referral forms have not been completed and returned to the Volunteering Hub, the individual may not take part in the trip

**Section 10: Private Vehicle Declaration**

Hull University Union recommends that trips are undertaken in regulated vehicles such as coaches and officially licensed mini buses. (HUSSO participants may not travel in private cars)

The Union does not check or inspect private vehicles and does not accept any responsibility or liability for checking or inspecting private vehicles used for trips off-campus. Where private vehicles are used for such trips, it is the responsibility of drivers and their passengers to comply with all relevant legislation and safety standards and in particular all requirements in respect of third party insurance under the Road Traffic Act 1988,

Drivers of private vehicles must accept sole responsibility for the safety of passengers and other road users and must sign a declaration confirming this.

Where private vehicles are to be used for trip, drivers must complete the following details and sign the declaration below.

Drivers name ………………………………………………………………..

Drivers Address ……………………………………………………………..

 ……………………………………………………………..

 ……………………………………………………………..

 Post code………………………………………………….

Contact number ……………………………………………………………..

Vehicle Make and model……………………………………………………

Registration number ………………………………………………………..

As the above named driver, I confirm and declare that:

* I hold a current, valid driving licence which authorises me to drive the above named vehicle.
* I hold valid insurance in respect of third party risks in relation to the Vehicle and the Trip which complies with the requirement of s.143 and Part VI of the Road Traffic Act 1988.
* Where appropriate, there is in force a current MOT certificate for the vehicle.
* The Vehicle is roadworthy and safe to carry passengers.

No-one other than me (and ................................................) will drive the Vehicle during the Trip\*

I understand that I have sole responsibility for the safety of my passengers and other road users while I am driving.

Signed.............................................................................................................................

Print name.......................................................................Date.................................................

\*If another driver is to driver the vehicle, s/he must complete another declaration.

**Section 11: Event/Trip/Project Coordinator Declaration**

I……………………………………..... (Full name) as Events/Trip/Project/Activities organiser/Leader

of……………………………………….(name of Club/Society/Project ) understand that I have duty of care towards all persons taking part in this Event/Trip/Project/Activity.

I understand that I have a duty to ensure, as far as reasonably practicable, that all activities are conducted with a due regard to the safety and well-being of the participants and members of the general public.

I agree to report any occurrence of an incident or near miss involving members, spectators or members of the general public to the relevant personnel in all instances by calling University Security (01482 465555) at the time of the incident and as soon as possible to Hull University Union directly where I will submit all details for an **Incident** or **Near Miss Report**.

All members taking part on this Event/Trip/Project/Activity will be briefed by me prior to or at departure. The briefing will include the aims of the trip, the administrative and emergency procedures and the individual responsibility of each participant attending.

I understand that for sporting based activities all participants must have paid their AU insurance, and that it is my responsibility to ensure that only those with AU insurance participate.

I understand that for any activity taking place outside of the United Kingdom all participants must hold valid travel insurance for the entire duration of the time spent outside the United Kingdom, and that it is my responsibility to ensure that only those with valid travel insurance travel.

As organiser/leader of this Event/Trip/Project/Activity, I have submitted all relevant forms to Hull University Union. A comprehensive risk assessment has been completed by a competent person and is up-to-date and valid at the time of submission of this pack. I have read and understood the risk assessment and I agree to follow all control measures in this risk assessment. I will ensure that all participants are briefed in full regarding the hazards of the activity outlined.

I confirm that at the time of submission all details included in this pack are accurate and true. I understand that it is my duty to inform Hull University Union of any changes to the details included in this pack as soon as they occur. I understand that failure to do this will result in Hull University Union revoking any endorsement of the Event/Trip/Project/Activity, and that in the event of this it is my responsibility as Event/Trip/Project/Activity Organiser/Leader to ensure the Event/Trip/Project/Activity does not go ahead.

Signed: ............................................................................

Print name: ......................................................................

Date (dd/mm/yy): ............................................................