



MONTEBELLO UNIFIED SCHOOL DISTRICT
Instructional Services Division

FOREIGN TRAVEL EMERGENCY CONTACT LIST

Date _____

Destination/Activity: _____
(Please be specific: London, England - SHS Band)

Departure Date: _____ Return Date: _____

Supervising Teacher (Please print) _____ Site: _____

Supervising Teacher _____
Extension _____ Cell phone number _____ International Cell number _____

Additional MUSD Employees:

Name (Please print) _____ Cell Number _____

Name (Please print) _____ Cell Number _____

Name (Please print) _____ Cell Number _____

Travel Agency or Tour Group Information:

Your group Tour # or identifying # _____

Name _____ Phone# _____

Address, City, State _____

Contact Person _____ Phone# _____

Emergency Contact Phone# _____

MUSD Emergency Contacts:

(This section of the form will be completed by the Deputy Superintendent's Office and returned to Supervising Teacher prior to the trip.)

In case of emergency during your foreign travel immediately contact persons listed below.

Superintendent _____

Superintendent _____

Deputy Superintendent _____

Police Services _____