

PROPOSAL FORM



TRIP | EVENT 2026-27 Season

This form is intended as a Guideline to those submitting a proposal of a DAY TRIP, EAST TRIP, WEST TRIP or any other SCOL EVENT to the Board of Directors for consideration .

All proposals submitted will then be review by the Board. Notification of acceptance and/or nonacceptance will be given after review. The Board will advise of the Club subsidy available for your Trip/Event once budgets are in place for the Season in which your Event/Trip will commence.

PLEASE NOTE: Some items listed here may not pertain to your specific Trip/Event. Please enter all information to the best of your knowledge, to give the best overview to the Board for the decision making process.

At time of acceptance, the Board will require a detailed financial report of all costs associated with the Trip/Event, including a summary of the cost per person and how it was calculated. A RETAIL cost of your Trip/Event is also needed for the purpose of advertising the value of being a SCOL Member, vs. a Non-member, vs. a Retail Customer.

All Trips/Events must be run in compliance with the current SCOL Bylaws and will be provided if needed.

We thank you in advance for the time and attention you have given in presenting this proposal and appreciate that you have volunteered to provide the Club a well planned, and executed exciting Trip/Event for all to enjoy!

Today's Date ____ / ____ / ____

Your Name

Your e-Address

Phone () ____ - ____

How long have you been a SCOL Member _____

Have you run any previous SCOL Trips/Events

YES NO

If yes, please list

What are you proposing

DAY TRIP **EAST TRIP** **WEST TRIP**

OTHER *please describe below*

Date(s) of your Trip/Event

Will you be offering Trip Insurance

YES NO

Are there Cancellation Policies related to your Trip/Event

YES NO

If yes, please explain

Please use the space below to describe and/or explain any details that pertain to your Trip/Event that are not covered on page 2 of this PROPOSAL FORM.



TRIP / EVENT

Destination and/or Location _____

Date(s) _____

BOOKING RESERVATIONS

Tour Company _____

Deposit(s) _____ Date(s) _____

Deadline(s) _____

Any Discounts for # of Guests _____

Any Discounts for Booking Early _____

Sign-Ups
 Minimum to make Trip/Event go _____
 Maximum to go on Trip/Event _____

LODGING RESORT

Name _____

Location _____ # of Days _____

Type of Accommodations
 CONDOS HOTEL OTHER _____

Room Occupancy	# of Rooms Available	Rate per
SINGLE	_____	\$ _____
DOUBLE	_____	\$ _____
OTHER <i>please list</i>	_____	\$ _____

Hospitality Room Available for Club use? NO YES Cost \$ _____

Deposit(s) _____ Date(s) _____

Deadline(s) _____

SKIING RESORT

Location(s)	# of Days	Cost
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Type of Transportation to/from Lodging Location
 SKI in/out SHUTTLE BUS OTHER
 Frequency _____ Cost \$ _____

AIR TRIP TRANSPORTATION

Departure Date ___ / ___ / ___ From _____

Destination Location _____

Airline Carrier _____
 Direct Flight YES NO

If no, explain _____

Personal Vehicle Parking *available / needed* YES NO

If yes, explain _____

Ground transportation to/from Resort *included* YES NO

If no, explain _____

Return trip from same location YES NO

If no, explain _____

Return Date ___ / ___ / ___ From _____

Destination Location _____

Airline Carrier _____
 Direct Flight YES NO

Cost \$ _____ per person Round-Trip

Deposit \$ _____ Date ___ / ___ / ___

Deadline _____

BUS TRIP TRANSPORTATION

Departure Date ___ / ___ / ___ From _____

Destination Location _____

Personal Vehicle Parking *available / needed* YES NO

If yes, explain _____

Return Date ___ / ___ / ___ From _____

Destination Location _____

Bus Operator _____

Cost \$ _____ per person Round-Trip

Deposit \$ _____ Date ___ / ___ / ___

Deadline _____

Driver Accommodations needed YES NO

Driver Tip Calculation \$ _____

ADDITIONAL PLANS

Activities / Supplies / Entertainment	Cost
_____	\$ _____
_____	\$ _____
_____	\$ _____