

Marquette University Club Sports Department of Recreational Sports

TRAVEL ITINERARY

SPORT: _____

DATE OF GAME: _____

SCHEDULED GAME AGAINST: _____

MODE OF TRANSPORTATION:
_____ CAR (HOW MANY _____) _____ VAN (# OF _____)
_____ BUS

DEPARTURE TIME AND DATE: _____

RETURN TIME AND DATE: _____

LODGING: _____

TELEPHONE: _____

LOCATION OF EVENT: _____

TELEPHONE: _____

ROSTER: (* DESIGNATES DRIVER)

_____	_____
_____	_____
_____	_____
_____	_____

***completed forms must be turned in to Scott Anderegg at the Rec Center three days prior to scheduled departure.**



RECREATIONAL
SPORTS