

MICHINDOH OUTDOOR EDUCATION SCHOOL INFORMATION WORKSHEET

School _____ School Phone (____) _____
 Fax (____) _____ Principal _____
 Lead Teacher _____
 Week Attending Camp _____ through _____
 Other Schools Attending Camp _____

Teachers Attending Camp:

Total Number of:

	<u>Teachers</u>	<u>Students</u>	<u>Cabin Leaders</u>
_____	_____ Male	_____ Male	_____ Male
_____	_____ Female	_____ Female	_____ Female
_____	_____ Total	_____ Total	_____ Total
_____			___ parents
_____			___ teachers
_____			___ high school
_____			___ college
			(check all that apply)

Special Teacher and School Staff Arrangements: _____

Birthdays: _____

Special Health Concerns: _____

PROGRAM AREAS:

Class Choices:

- | | | |
|----------|-----------|-----------|
| 1. _____ | 6. _____ | 11. _____ |
| 2. _____ | 7. _____ | 12. _____ |
| 3. _____ | 8. _____ | 13. _____ |
| 4. _____ | 9. _____ | 14. _____ |
| 5. _____ | 10. _____ | |

- Choose **13 Classes** if you would like **one rest time** during your week.
- Choose **12 Classes** if you would like **two rest times** during your week.
- Chose **10 Classes** if you have a **4 day** week with **no rest times** during your week.
- Please Note: if you have **skit night**, one hour of class time is required for **drama** practice.

Afternoon Activity Preferences: _____

Evening Activities: Relays/Campfire
 Nature Charades/Wacky Olympics/Dutch Auction
 Skit Night
 Square Dance

Monday - _____ / _____
Tuesday - _____ / _____
Wednesday - _____ / _____
Thursday - _____ / _____

Gold Rush, Wolf Pack and Night Hikes are seasonal

Additional Comments: _____

Arrival Time: _____ Departure Time: _____

Cabin Leader Arrival Time: _____