



OUTDOOR SCHOOLS School Details Sheet

Please fax this form to 1 (403) 673-2179 or email it to peter.carson@calgary.ymca.ca ONE WEEK prior to your arrival.

YMCA Program: Hector Spring School

Season: Spring Year: 2015

Outdoor School Dates: _____ to _____

School Name: _____

Teacher Coordinator's Name: _____

Email address: _____

of Students attending: Males _____ Females _____ Total _____

Teachers Attending:

Food Restrictions:

(Please include additional teachers and/or parent volunteers on a second sheet)

Emergency Vehicle(s) Provided by: _____

Classroom Groupings: (Teacher's Name &/or Class Name, e.g.: 6A, Mrs. C)
