

PARTICIPANT APPLICATION OUTDOOR EDUCATION INSTITUTE

An institute for the formal and informal educators of students ages 3-13

OCTOBER 21 and 22, 2017

Name _____ School District / Affiliation _____

Email _____ Phone with area code _____

Address _____ County _____

Educator Type: Pre-K Teacher K-12 Teacher - Grade(s) _____ Other, Explain _____

School or Organization: _____ Position/Title: _____

Please select which day/days you will be attending.

Saturday, October 21st, 2017

Sunday, October 22nd, 2017

Both October 21st and 22nd. I plan to stay overnight at Whiskeytown Environmental School.

Both October 21st and 22nd, but I am choosing to stay off-site.

Please tell us why you would like to participate in the Outdoor Education Institute. _____

Mail completed application and \$65 non-refundable application fee to:

Spring Rivers Foundation

P.O. Box 143

Cassel, CA 96016

Have Questions or Need Additional Information? Contact:

Allison L. Breedveld

Education Director, Spring Rivers Foundation

530-722-7373 or allison@springrivers.org