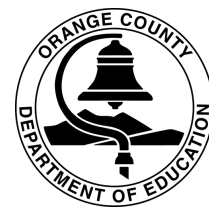




Science Night Schedule

Inside the Outdoors®



Email this schedule at least FOUR WEEKS PRIOR to your participation date.

Phone: 714-708-3885

Email: ITOregistration@ocde.us

Website: insidetheoutdoors.org

School _____ District _____ Phone _____

School Address _____ Contact Name _____

Please note where the Traveling Scientist Vehicle will park _____

Special instructions (check in location and instructions, set up times, etc.) _____

Date _____ Estimated Number of Participants _____

Event Times _____ Event Theme _____

Location

☐ Quad/Outside Area ☐ Classroom ☐ MPR ☐ Other (please describe) _____

Program Options

*requires 1-2 tables.

☐ Booth - Stop by to meet our animals, learn about our programs and explore some of our various animal evidence items.

☐ Presentation - Scheduled presentation for up to 60 participants, enter time(s) below.

☐ Amazing Animals ☐ Other _____

Schedule Times

Will we be part of a rotation? ☐ Yes ☐ No

If yes, give times for rotations:

Time (From - To)	Number of Participants

Additional Notes