

Trip Schedule - 2 hours

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 Information Transportation Information Mark your mode of transportation and let us School Name _____ know the number of vehicles attending. School Phone _____ ■Bus # Car # District _____ Please note departure time City _____ from school: **Inclement Weather** (You will be contacted between 5:45-6:30 am on the day of the trip for possible reschedule information.) **Primary Contact Name** Secondary Contact Name Principal Vice Principal Teacher Office Staff Principal Vice Principal Teacher Office Staff Cell Phone Number Cell Phone Number Please text me with this information Please text me with this information **Field Trip Program: 2 Hours** Number of Groups____ Date of Field Trip: Irvine Regional Park *Split students into groups of 18-20. *Select group names below. Mt. SAC *Assign at least one adult per group. Santiago Oaks **Bobcat** *Number of Students Attending Shipley Nature Center Coyote Wild Wetlands **Grade Level Attending** Lizard Other Owl *If your enrollment changes, you must Field Trip Times email at least 20 days prior to the scheduled Rabbit field trip date with the revised enrollment to 9:00 a.m. - 11:00 a.m. Snake avoid additional fees. 11:30 a.m. - 1:30 p.m. *Late arrival may shorten program. **Day of Trip Reminders Lunch Options** Bring Group List - 2 copies with Irvine Regional Park Will you eat lunch on-site at Irvine Park? Yes absences crossed off Mt. SAC Will you eat lunch nearby at Snow Creek Park? Yes Bring OCDE/Inside the Outdoors Santiago Oaks Will you eat lunch on-site at Santiago Oaks? Medical Release Forms Yes **Shipley Nature Center** Will you eat lunch in Central Park? Have students in groups with labeled name tags Wild Wetlands Will you eat lunch nearby at Mariners Park? **Lunch Notes: Unique Student Needs** (i.e. reduced mobility, allergic to bee stings, health conditions that would impact participation) Name **Unique Need Group Name**

Additional Notes