

 **Salmon Watch Field Trip Opportunity**

Salmon Watch, an educational outreach part of the World Salmon Council is providing funding for our students to participate in a full day field trip to learn about the habitat, life cycle, and importance of native salmon to our lives in the Northwest. This opportunity is being provided because I attended a 10 hour training this past summer. Unfortunately, funding is only for 30 (roughly half) of our team’s students. The field trip will take place on the Salmon River Area (Trail 742) and will have 4 field stations staffed by Salmon Watch volunteers. Salmon (hopefully) should be running in this area for students to observe.

I have spots for the first 30 science students to apply as well as room for 5 chaperones. Your application is a completed permission slip, (see below) and a short explanation of why you would like to go.

Permission slips and a liability waver need to be handed in before **Monday, September 15** to be considered. ***NOTE: Field trip is rain or shine, nearest facility is a port-a potty. Students will also need to make-up work they miss in other classes.***

**Student Portion:**

I would like to go on the Salmon Watch field trip because:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Parent Portion:**

My student has permission to attend the Salmon Watch field trip on **Monday, September 22**. Busses will leave at 9, and will be back in time to catch the regular school bus at 3:35. There is no cost for this trip, however, **students will** ***need to provide a lunch and weather appropriate clothing***. (Please see Mz. Pass if either is a problem for you.)

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number where I can be contacted in case of emergency (9AM-3PM):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies/Medical Information important to know for the trip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission to have \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(student name) treated in case of an emergency. **Sign and date below:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\**Please fill out waiver required by Salmon Watch on the other side.\*\**

I can be a chaperone on this field trip (*Chaperones will need to fill out their own waver)*

*Questions??? Contact Mz. Pass@ 503 431- 5266 or apass@ttsd.k12.or.us*