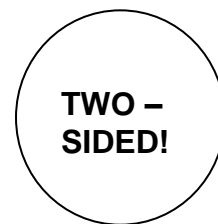




“Inspiring a Passion for Learning”



Group Information Form

Please FAX or mail the completed form.
Alternatively, you can scan/email to dan@salish.org

General information

Group/School Name: _____

Address: _____ City: _____ County: _____

Billing Address (if different): _____

City _____ State _____ Zip _____

School Phone #: _____

Teacher/Organizer: _____ E-mail: _____

Teacher Phone #: _____ Cell Phone #: _____

Alternate Contact: _____ E-mail: _____

Grade/Age of Students: ____/____ School District: _____ ESD _____

of Students: female _____ male _____ # of Adults: female _____ male _____

Free & Reduced lunch % of school: _____

School/Group Type (circle one): Public Private Home Other _____

Student demographics:

| ETHNICITY | # OF STUDENTS |
|------------------|---------------|
| African American | |
| Asian American | |
| Caucasian | |
| Native American | |
| Latino | |
| Other | |
| Total # in Class | |

School Program Planning & Logistics

Teacher Goals & Objectives in relation to Salish Program

-
-
-

List of coursework topics conducted in class to prepare students for Salish Research Project:

-
-
-
-

Confirm Sailing Expedition Logistics

Confirm Expedition Dates: _____

Departure Marina: _____

Arrival Marina: _____

Confirm Marina Departure and Arrival Times: _____

Travelling by bus? Yes No

Bus Line Phone Contact: _____

Important Information for Sail Dates:

Emergency Contact – On-call Salish Cell Phone: 206.715.0312