

**YMCA Willson
Outdoor Education
2008-2009 Reservations**

Name of School: _____ Date Received in OE Office _____

Contact Person: _____ Today's Date: _____

School address: _____ Grade Level: _____

City/St: _____ Zip Code: _____ Phone: _____

Fax _____ E mail _____

Month Attended in 2006-07 _____ 2007-08 _____

Preferred season 2008-2009 _____ Horse rides: (Y / N)

Minimum number of students per visit: _____ Maximum number students: _____

Circle length of stay: 2day/1night, 3day/2nights, 4day/3nights, 5day/4nights, other _____

We ask that you rotate seasons and days of the week, for example over three years attend in fall, winter, and spring with both the beginning and ending of the week. Thank you for your flexibility in building our schedule.

List dates in each season. Please star (*) your preferred choice for each season. Use the extra space if needed.

Fall: September 2– November 7, 2008

1. _____
2. _____
3. _____

Winter: November 9, 2008 – March 20, 2009

1. _____
2. _____
3. _____

Spring: March 23 – June 5, 2009

1. _____
2. _____
3. _____

We are not able to attend on the following days: _____

Note: Please check your school calendar for teacher in service, parent/teacher meetings, standards testing, and other dates related specifically to your school or district: (COTA, WOE)

Return completed form to:
Ph. 1-800-423-0427
Fax (937) 593-6194

YMCA Willson
2732 County Road 11
Bellefontaine, Ohio 43311

Kori Keck, Outdoor Education Director **E-mail: OE@ymcawillson.org**
Please return this form **by March 7, 2008** to ensure prompt consideration! Thank you.