** Please list the earliest possible time that your class/school could arrive at the tour site and the latest time that your school/class needs to depart from the tour site. We will do our best to accommodate the requests of all the Districts and schools.

** Please indicate your first, second and third choice of days that your school can come (May 1, 2, 3 or 4). If you can come on multiple days, please indicate which classes should be together in the Other Scheduling Notes or Requests column. Also in the Scheduling Notes or Requests column please indicate any days that will not work for your school or class.

** In the Scheduling Notes column list any special needs or requests for scheduling, (ex: student in wheelchair).

** We will deliver the completed schedule, Teacher Guide and student resource materials to each District/ School by March 18.

** If for some reason you must cancel after submitting your schedule, please contact our office as soon as possible. You may reach us at 676-6736 from 8:30 – 4:30, Monday - Friday. Also, please inform us of any Special Scheduling Notes that may occur after you have scheduled your time(s), (ex: student broke leg and is on crutches).
FOREST CONSERVATION TOUR 2006  
May 1-4  
(Monday – Thursday)

Please register our school(s)/class(es) for the 2006 Forest Conservation Tour.

School Name: ______________________________________________________________________

Mailing Address: ____________________________________________________________________

City: ___________________________ ZIP: ___________________________

Building or District contact Person: ____________________________________________________

Contact person's telephone number: ___________________________ email: ____________________

Please indicated 1st choice of day __________; 2nd choice of day _________ 3rd choice of day _________

<table>
<thead>
<tr>
<th>TEACHER NAME (First &amp; last name)</th>
<th># STUDENTS</th>
<th>Earliest Possible Start Time</th>
<th>Latest Possible Start Time</th>
<th>Other Scheduling Notes or Requests</th>
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Return this form by February 28 to:
Cheryl Kahle
WSU Whatcom County Extension
1000 N. Forest St. #201
Bellingham, WA 98225
or
Fax to: 360/738-2458
Or
Email: whatcom@wsu.edu