

# CAMP PLANNING FORM

## HEARTLAND OUTDOOR ENVIRONMENTAL SCHOOL

School \_\_\_\_\_ School Phone number (\_\_\_\_) \_\_\_\_\_  
 Fax (\_\_\_\_) \_\_\_\_\_ Principal \_\_\_\_\_  
 Week Attending Camp \_\_\_\_\_ through \_\_\_\_\_  
 Other Schools Attending Camp \_\_\_\_\_

Teachers Attending Camp:	Total Number of:		
_____	Teachers	Students	Cabin Leaders
_____	_____ Male	_____ Male	_____ Male
_____	_____ Female	_____ Female	_____ Female
_____	_____ Total	_____ Total	_____ Total

Special Teacher and School Staff Arrangements: \_\_\_\_\_  
 \_\_\_\_\_

Birthdays: \_\_\_\_\_

Special health concerns: \_\_\_\_\_  
 \_\_\_\_\_

**PROGRAM AREAS:**

Class Choices:

- |          |           |           |
|----------|-----------|-----------|
| 1. _____ | 6. _____  | 11. _____ |
| 2. _____ | 7. _____  | 12. _____ |
| 3. _____ | 8. _____  | 13. _____ |
| 4. _____ | 9. _____  | 14. _____ |
| 5. _____ | 10. _____ |           |

Choose **14 class hours** if you have a **5-day week**.  
 Choose **10 class hours** if you have a **4-day week**.  
 Choose **8 class hours** if you have a **3-day week**.  
 Please Note: if you have **skit night**, one hour of class time is required for **drama** practice.

Afternoon activity preferences: \_\_\_\_\_  
 \_\_\_\_\_

**EVENING PROGRAM OPTIONS:** (please list your top choices by preference)

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Additional Comments: \_\_\_\_\_