

# School Field Trip Registration Form

National Historic Oregon Trail Interpretive Center

**1. Which 2-hour program would you like?**

- ☐ Daily Life on the Oregon Trail (Grades 2-3)
- ☐ Survival and Success on the Oregon Trail (Grades 4-5)
- ☐ Whose Land Is It? (Grades 6-8)

**2. What are your preferred dates\* and times\*\*?**

*\*Dates: Field trips can be booked on Tuesdays, Wednesdays, and Thursdays. Friday requests are challenging to accommodate but will be considered.*

*\*\*Start Times: Field trips can start on the half hour anytime between 10 am and 2 pm and last two hours. Please indicate the range of times during which you'd be available to start on the selected date.*

- |                            |        |            |                         |
|----------------------------|--------|------------|-------------------------|
| a. 1 <sup>st</sup> Choice: | T W Th | Date _____ | Start Time Range: _____ |
| b. 2 <sup>nd</sup> Choice: | T W Th | Date _____ | Start Time Range: _____ |
| c. 3 <sup>rd</sup> Choice: | T W Th | Date _____ | Start Time Range: _____ |
| d. 4 <sup>th</sup> Choice: | T W Th | Date _____ | Start Time Range: _____ |

**3. How many students and chaperones will participate?**

- ☐ Student Grade Level(s): \_\_\_\_\_
- ☐ Number of Students (minimum 24, maximum 48): \_\_\_\_\_
- ☐ Number of Adult Chaperones (1 required per 6 students): \_\_\_\_\_

**4. Please fill in your contact information:**

- ☐ School Name: \_\_\_\_\_
- ☐ School Address: \_\_\_\_\_
- ☐ Contact Info for Lead Teacher or Trip Coordinator:
  - Name: \_\_\_\_\_
  - E-Mail Address: \_\_\_\_\_
  - Phone Number: \_\_\_\_\_
- ☐ Will this visit be part of an overnight field trip? Yes / No
- ☐ Special Considerations / Notes: \_\_\_\_\_

**FOR NHOTIC STAFF USE**

- Date/time received: \_\_\_\_\_
- Received by: \_\_\_\_\_
- Date/time of confirmed field trip: \_\_\_\_\_

