April 15, 2015

Dear 8th Grade Parents,

Ms. Christensen and I are very happy to take the 8th grade class on our third annual premier outdoor ed. experience in Yosemite Valley. One of our goals in science at OTA is to have our students understand where their water comes from and how their lives are affected by our local watershed. As a unique extension, we hope that all students can draw many parallels to our San Diego River Watershed and that of Yosemite Valley. Our activities will include camping, hiking, river rafting, rock climbing, fishing, and of course sight seeing! It is our sincere hope that all students will learn to better appreciate our national, state & local resources and begin to see the relationships that bind us to the natural world and our environment.

All told the expenses to cover food, camp fees & rafting total **$250**. Additionally each student will need to bring funds for two meals (for lunches en route to and from OTA), which is approximately **$20**. OTA field experiences are intended for all of OTA students and as with all of our trips and programs, funding is available for any and all families who need it. We are planning on providing healthy and well-balanced meals and snacks for the duration of the trip, and ask that students do not bring any extra food, especially sodas, candy, chips, or other junk food.

We will be in constant contact throughout the trip with Mr. Donahue & Mrs. Kamanski and will post updates on our adventures as quickly as possible. If for any reason you need to contact me before or during the trip, please email jmajor@oldtownacademy.org or call my cell (619) 916-8384.

Sincerely,

Jeff Major
STEM Director
Old Town Academy

Payment Attached (cash or check made out to Old Town Academy):

_____ Full amount $250

_____ Other Amount: $_____

_____ Requesting scholarship

Tent Needed: Yes/No

_____ I give permission for my child to be given Ibuprofen if necessary

_____ I give permission for my child to be given Aspirin if necessary

_____ I give permission for my child to be given Benadryl if necessary

Any other medications (clearly labeled with child's name and any important information on it) need to be given to Mr. Major or Ms. Christensen. In the case of inhalers, we require two new inhalers for the trip.

Old Town Academy
AUTHORIZATION FOR STUDENT PARTICIPATION
ONE-DAY OR SEASONAL ACTIVITY

_____ wishes to participate in
(Student's name)

Yosemite Camping Trip
(Activity)

on Sunday 5/10 (Date) from 6:00 a.m. p.m. to 5:00 a.m. p.m. or

during Q4 (Semester or Season) from 5/10/15 (Date) to 5/14/15 (Date).

Transportation will be by _____
(Chartered bus, private car driven by school employees, parents, or students)

It is necessary that the parents specifically authorize that their child be included in the activity. Supervision for this event will be furnished by the school, but parents should understand that supervision will end at the time slated above. The school will take every precaution to assure the welfare and safety of your son/daughter participating in this activity. However, it is important that you understand that the school cannot assume financial or legal liability in case of injury or accident.

Cold sack lunches are available from the school cafeteria. Students who qualify may receive meals free or at reduced price.

If you wish your son/daughter to participate in the above described activity, please complete the request for participation form below, and return it to the school immediately.

Mi Christens — Activity Sponsor

Principal

(Tear on dotted line and return lower portion.)

PARENT AUTHORIZATION FOR PARTICIPATION

I, the undersigned, authorize my son/daughter _____
(Name of student)

to participate in Yosemite Camping Trip
(Name of activity)

scheduled for Sunday-Thursday (Semester) from 6:00 a.m. p.m. (Date) to 5:00 a.m. p.m., or (Date)

during Q4 (Semester or Season) from 5/10/15 (Date) to 5/14/15 (Date).

California law (Education Code Section 35330) provides that any person making a field trip or excursion waives all claims against the school district and the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion.

_____
Date Signed

_____
Signatures of Parent(s) or Guardian(s)

OTA 8th Grade Yosemite Trip Packing List
Sunday May 10-Thursday May 14

For Camping:
Tent (if you need one please let Mr. Major know ASAP)
Sleeping Bag
Pillow
Sleeping Pad (optional)
Blanket (optional)

Clothing:
T-shirts
Athletic Shorts/Pants/Sweatpants
Non-cotton base layer (to wick away sweat)
Fleece or sweater
Rain Jacket/Windbreaker
At least 3 pairs of hiking socks
Comfortable sneakers/hiking shoes (liners optional)
Bathing Suit
Towel
Water sandals (optional)
Thermal underwear (optional)
Gloves (optional)

Other:
Reusable dinnerware and cutlery
Hat/Sunglasses
Refillable water bottle/camelback
Small backpack/daypack
Camera (optional-student's responsibility)
Book/Journal (optional)
Sunscreen
Lip balm
Bug spray
Flashlight/headlamp
Toiletries*
Medications**

*Toiletries should be packed in a small bag that will be placed in a bear locker each night.

**Please pack medications in a clear plastic bag (clearly labeled with your name and any important information on it) and give it to Mr. Major or Ms. Christensen.

Yosemite Itinerary-
Tentative Plan

	Sunday May 10	Monday May 11	Tuesday May 12	Wednesday May 13	Thursday May 14
6 am	**Meet at 5:30 a.m.** Leave OTA 6 a.m.				
7 am					
8 am		Breakfast at Camp	Breakfast at Camp	Breakfast at Camp	Breakfast at Camp
9 am		Bridalveil Fall	Lukens Lake/ Tenaya Lake	Inner tubing/Rafting	Leave Yosemite
10 am		Vernal/Nevada Falls Hike			
11 am	Stop in Bakersfield/Fresno for Lunch **(Bring $)**		Hike/Swim/Fish Lunch at the Lake (Packed Lunch)	Lunch in Yosemite Valley (Packed Lunch)	
12 pm		Lunch in Yosemite Valley (Packed Lunch)	Art Project		Stop in Bishop for Lunch **(Bring $)**
1 pm					
2 pm				Yosemite Loop Trail Gallery/Museum Gift Shop	
3 pm	Mariposa Grove	TBA			
4 pm					
5 pm	Set up Camp at Hodgdon Meadows Dinner at Camp Camp Meeting Campfire/Relax				
6 pm		Dinner at Camp Campfire/Relax	Dinner at Camp Campfire/Relax	Dinner at Curry Village **(Bring $)**	Arrive back at OTA
7 pm					
8 pm					

ACADEMY
K-8 CHARTER SCHOOL
2120 San Diego Ave.
San Diego, CA 92110

Medication Authorization Form

Medicine Must Be In Its Original Container

Child's Name: _____

Medication Name: _____

Dosage Amount: _____

Time to be Given: _____

Date(s) to be Given: _____

Side Effects/Anticipated Reactions: _____

_____

Special Instructions (if applicable):

_____

_____

_____

_____ _____

Parent's Signature Date

***If all information is not filled in completely, medication will not be given.**

Administration Documentation

Date Given	Time Given	Dosage Given	Staff Signature

*Maintenance medication authorization shall be updated as changes occur or at least every three months.