

Chimacum Middle



Greetings 6th grade families!

As part of Chimacum Middle School 6th grade Environmental Stewardship Project your child will get to participate in three upcoming outdoor experiences. Part of being an environmental steward is getting outdoors to study our watershed as we figure out ways to help maintain all the different habitats in our valley. This year Chimacum Middle School's 6th grade stewardship project was awarded an Ocean Guardian School grant and 6th graders are working to ensure our school becomes an Ocean Guardian School because getting the grant doesn't ensure we become one (our students have to do the work and show what they learned!).

In class students are learning about water pollution and human impact on our world's waters as they complete a Lego challenge known as the Hydro Dynamics Challenge. Restoration Stewards from the North Olympic Salmon Coalition (NOSC) will come in our Science classes to teach kids about Chimacum Creek and then in April students will go back to the creek but instead of fish trapping, this time they will be collecting water quality data. CMS 6th graders have doing that since 2002!

After water quality testing, students will go to our very own Finnriver farms to participate in some restoration work that includes potting native shrubs and trees that they will get to plant along Chimacum Creek in 7th grade! Then in June students will share all that they have learned at our annual Youth Summit at the Salmon Center in Belfair.

In order to save us all time and effort I have prepared all three permission slips and a photo release form for you to fill out all at once instead of one this month, one in April, and the third one in late May. Please fill all the permission slips and the release form as soon as you can and have your child bring it back to Science so that I can plan all these amazing field trips.

Thank you! If you have any questions please feel free to email me, call me, or message me on Bloomz.

Al Gonzalez
360-302-5944
al_gonzalez@csd49.org

CHIMACUM SCHOOL DISTRICT Field Trip Permission Form

Student Name _____ Date: _____

General Information: Return this form to your child's school before Friday, March 30, 2018
and keep any attachments for your information.

The Middle School Science Department	
is planning a trip to: Chimacum Creek	
The purpose of this trip is: to collect water quality data using handheld probes.	
Trip destination: under the bridge near Cenex.	Phone: 360-302-5944 (CMS)
Address: Right by the school, road access.	
Place of Lodging (if applicable): N/A	
We will leave from: CMS	Date/Time: A few days during Science.
We will return to: CMS	Date/Time: We return to Science class.

Itinerary Attached ☐ List of Items Attached ☐

Number of Students Attending: 20	Number of Adults Attending: 1
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Type of Transportation: District Vehicle ☐ District Bus ☐ Walking ☒ Private Vehicle ☐
Commercial Transportation (describe): _____ Other: _____

Information below is to be completed by the guardian of the student.

Medical Information: The following special health problems should be noted and adequate precautions taken (list such items as unusually severe reaction to bee stings, other severe allergies, hemophilia, diabetes, heart disease, etc.)

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The following medications, prescriptions or special diets are needed:

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Medical Release: In the event of an accident or illness, I understand that reasonable effort will be made to contact the guardian immediately. However, if I am not available, I authorize the school district to secure emergency medical care, as needed.

Name of Preferred Doctor:	Phone:
Name of Insurance Carrier:	

This activity provides a learning experience for students and allows them an opportunity to apply their classroom learning. Although I understand that the school district will make reasonable efforts to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in the activity. Being fully aware of the risks, I hereby give consent for my child to participate in the activity.

Guardian Name: (print)	Home Phone:
Address:	Work Phone:
Guardian Signature:	Emergency Phone:

NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION
NATIONAL MARINE SANCTUARY PROGRAM
ADVERTISING AND PUBLICITY CONSENT AND RELEASE FORM

Chimacum Middle School

Al González

School

Teacher

I agree and consent that the National Oceanic and Atmospheric Administration and National Marine Sanctuary Program and their nominees and assigns (collectively "NOAA"), may use, in their sole discretion, the likeness and/or photography taken of me, _____ (student name) or any reproduction thereof, in any form, style or color, together with any writing and other advertising material, in connection therewith, including television and including, but not limited to, the use of my name and/or quotations..

This consent and release is given without limitation upon, or liability for, any use for advertising, illustration, publication, broadcast of every kind, or in trade or media, or for any purpose for promotion by NOAA. I further agree that such photography and/or likeness, and the film, tape, plates, and negatives thereof, shall be and remain the exclusive property of NOAA. I further waive any right to inspect or approve the commercial, advertising or publicity material.

Date

Student Name (please print)

Student Signature

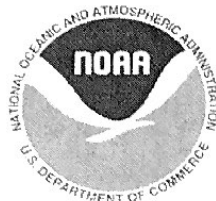
As the student named above is under 21 years of age, I hereby certify that I am the (Father) (Mother) (Guardian) of the person who is referred to above, and that I agree and consent to the foregoing in such capacity, as well as individually.

Date

Name of Parent or Legal Guardian (please print)

Signature of Parent or Legal Guardian

Address:



CHIMACUM SCHOOL DISTRICT Field Trip Permission Form

Student Name: _____ Date: _____

General Information: Return this form to your child's school before Friday, March 30, 2018
and keep any attachments for your information.

The Chimacum Middle School 6th grade Team	
is planning a trip to: Finnriver Farms (alternate assignment available upon request)	
The purpose of this trip is: Creek Restoration Education as part of our Env Ed Unit.	
Trip destination: Finnriver Farms	Phone: 360-302-5944 (CMS)
Address: 124 Center Road, Chimacum, WA 98325	
Place of Lodging (if applicable): N/A	
We will leave from: CMS	Date/Time: Tuesday, 4/24, 8am
We will return to: CMS	Date/Time: Tuesday, 4/24, 2pm

Itinerary Attached ☐ List of Items Attached ☐

Number of Students Attending: 64	Number of Adults Attending: 5
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Type of Transportation: District Vehicle ☐ District Bus ☐ Walking ☒ Private Vehicle ☐

Commercial Transportation (describe): _____ Other: _____

Information below is to be completed by the guardian of the student.

Medical Information: The following special health problems should be noted and adequate precautions taken (list such items as unusually severe reaction to bee stings, other severe allergies, hemophilia, diabetes, heart disease, etc.)

--

The following medications, prescriptions or special diets are needed:

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Medical Release: In the event of an accident or illness, I understand that reasonable effort will be made to contact the guardian immediately. However, if I am not available, I authorize the school district to secure emergency medical care, as needed.

Name of Preferred Doctor:	Phone:
Name of Insurance Carrier:	

This activity provides a learning experience for students and allows them an opportunity to apply their classroom learning. Although I understand that the school district will make reasonable efforts to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in the activity. Being fully aware of the risks, I hereby give consent for my child to participate in the activity.

Guardian Name: (print)	Home Phone:
Address:	Work Phone:
Guardian Signature:	Emergency Phone:



NORTH OLYMPIC SALMON COALITION

Restoring wild salmon habitat on the North Olympic Peninsula

www.nosc.org



Photo and Video Release Form

I hereby grant permission to the North Olympic Salmon Coalition (NOSC) and Finnriver Farm and Cider to use my or my minor child's photograph and/or video likeness. I understand that the photograph(s) and video(s) may be used in a publication (e.g., reports, newsletters, brochures) or in electronic media (e.g., PowerPoint, social media, or web site).

I acknowledge that NOSC may choose not to use my or my child's photo or video at this time, but may do so at its own discretion at a later date.

I hereby confirm that I have the legal right to consent to and do consent to the terms and conditions above.

Signature: _____ Date: _____

Names and Ages of Minor Children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

CHIMACUM SCHOOL DISTRICT

Field Trip Permission Form

Student Name _____ Date: _____

General Information Return this form to your child's school before Friday, March 30, 2018
and keep any attachments for your information.

The Chimacum Middle School 6th grade Team	
is planning a trip to: The Salmon Center	
The purpose of this trip is: Culminating activity to our Environmental Stewardship Project.	
Trip destination: The Salmon Center	Phone: 360-302-5944 (CMS)
Address: 600 NE Roessel Road, Belfair, WA 98528	
Place of Lodging (if applicable): N/A	
We will leave from: CMS	Date/Time: Friday, 6/8, 8am
We will return to: CMS	Date/Time: Friday, 6/8, 2pm

Itinerary Attached ☒ List of Items Attached ☐

Number of Students Attending: 64	Number of Adults Attending: 8
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Type of Transportation: District Vehicle ☐ District Bus ☒ Walking ☐ Private Vehicle ☐

Commercial Transportation (describe): _____ Other: _____

Information below is to be completed by the guardian of the student.

Medical Information: The following special health problems should be noted and adequate precautions taken (list such items as unusually severe reaction to bee stings, other severe allergies, hemophilia, diabetes, heart disease, etc.)

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The following medications, prescriptions or special diets are needed:

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Guardian Name: (print)	Home Phone:
Address:	Work Phone:
Guardian Signature:	Emergency Phone: