



SCHOOL TRIPS at FROST VALLEY YMCA

School Information Form

The purpose of this section is to let Frost Valley Program Instructors know more about your students, their backgrounds and goals for your trip. This will help us to create a program that will meet your needs.

Name of School _____ Grade/s _____

Number of years your school has attended Frost Valley _____ First year of visit _____
We would like to help you celebrate important anniversaries, such as... 10, 15, 20 or 25 years.

What kind of cabin leadership have you planned for this trip?
Teachers Parents Other (please specify) _____

If parents will be attending, what will be the extent of their role (attend classes, watch cabins at night, help to teach programs, etc)? _____
Please share a copy of the Frost Valley Policies with every parent and teacher who will attend.

How will your students be grouped for classes? (15 students per activity group)

Mixed academic levels Separate academic levels Why? _____

Boys and girls together Boys and girls separate Why? _____

If your school has several grades coming together will the students be separated in any special way?

By age Mixed together Why? _____

Is this a special population group? Yes No
If yes, please describe:

What is the academic profile of the students (are they high or low achievers, motivated or need motivating, etc.)?

What should we know about your students before they arrive? Please be specific (use some adjectives to describe your students behavior, curiosity level, approach to learning, etc.)

Have your students had any prior outdoor or environmental education experiences? Yes or No

Frost Valley YMCA

2000 Frost Valley Road, Claryville, NY 12725

TEL: 845-985-2291 FAX: 845-985-0056 WEB: frostvalley.org



If yes, please describe where and what activities in which they have participated.

What type of classroom experiences are your students accustomed to (hands-on, laboratories, individual work, small group work, research projects, etc)?

What goals and expectations have you discussed with your students regarding this trip? What area of life and earth sciences have your students studied?

What would you like your students to achieve from the Frost Valley experience?

Specific Programming Information

From the program list and class abstracts found in this planning pack, please select the correct number of programs according to your length of stay. Please use the goals you have described above to help determine the classes you choose. *(Your program coordinator can help you choose the classes to best meet your specific goals.)*

Frost Valley believes strongly that teacher involvement in the outdoor environment is vital to the success of the programs. Are there any classes you would like your teachers to teach while at Frost Valley?

From the evening program list and class abstracts, please select your choices for each evening at Frost Valley. *(Frost Valley will only offer one staff-led evening program period per night.)*

The success of your Environmental Education program will depend on how well the activities chosen meet the goals of your experience and on how well the participants and chaperones understand the goals of the trip.

Please review the goals with your students, teachers, and chaperones, so that everyone involved understands the purpose of your experience.

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Program Notes

Name of School: _____ also known as: _____

Address: _____

School Phone: _____ Fax #: _____

School Trip Leader: _____ Home Phone: _____

School email: _____ Home email: _____

What is the best time during the day to contact the trip leader? _____

Will the trip leader be at Frost Valley? yes no

If no, who will be the lead person on the trip to Frost Valley? _____

School's arrival time at Frost Valley (10:30 am is best) day _____, date _____, time _____

First meal: Lunch Dinner Bag lunch Note: _____

School's departure time from Frost Valley (1pm is best) day _____, date _____, time _____

Last meal: Lunch Dinner Bag lunch Special time: _____

Number of students attending _____ Grade/s _____ # of adults _____

Special education students? Yes No If yes, # _____ Mainstreamed? Yes No

In order to make the best use of space in the dining hall we request you plan on 10 people per table, with 1 adult and 9 students. **How many tables will you require?** _____

Do you want Frost Valley linens*? Yes No

*There is an additional cost for linens.

_____ # of pillows _____ # of blankets _____ # of sheet sets (includes 2 flats and 1 pillowcase)**

** No towels are provided.

Do you plan to use the Frost Valley Nurse? Yes No Refer to your contract for costs.

If you are not going to use the Frost Valley Nurse, you must bring your own nurse or health professional.

Please read the Health Center Information section in this packet.

Would you like us to plan a trip to your school for a presentation with parents and/or students or a planning/training meeting with teachers? Yes No



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We need to know in advance any important medical needs or dietary restrictions your students may have, such as allergies or vegetarian diets. Please list them here:

Is there any equipment (i.e. compasses, writing equipment, arts and crafts materials, etc.) you will need for your teacher taught classes that you would like Frost Valley to provide? Please list your needs here:

Do you intend to have your students complete a journal while at Frost Valley?

Please list any additional plans or important notes of which we should be aware?

To become familiar with the program and facilities, we strongly encourage teachers from "new" schools to visit Frost Valley before their trip. Please call us to set up a tour.