

Your Best Outdoor Activity

Your Name: _____ Subject: _____

Address: _____ Phone: _____

City: _____ St.: WA Zip: _____

Name of activity/camp/etc.:

What made it GREAT?

Location:

Appropriate/Available time of year/season:

Appropriate length of activity:

Appropriate ages & group size:

Approximate cost per youth:

Contact information:

Misc:

Signing your name (or typing it in if submitting this form electronically) is considered permission for this information to be posted on the District Website and/or shared on paper.

Signed: _____

Date: _____