

Nymboida Canoe Centre & Outdoor Education Enquiry form

Contact Details

School Name

Address

Postcode

Organising Teachers Name

Phone (school hours and after hours if convenient)

Fax

Email

Principal's Name

Principal's Signature

Participants

School Grade

No of students

No of Staff

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Males/Females ratio (specify if possible)

Males	Females
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Preferred visit time

Two preferences are required. Please indicate the school term, the week dates eg. May 25-30 and duration

	Term	Week	Dates	Duration
Preference 1	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	to	<input style="width: 100%;" type="text"/>
Preference 2	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	to	<input style="width: 100%;" type="text"/>
Arrival time	<input style="width: 100%;" type="text"/>		Departure time	<input style="width: 100%;" type="text"/>

Program Type (Please tick required activities)

- | | |
|--|--|
| <input type="checkbox"/> Intro to white water canoeing | <input type="checkbox"/> Intro to white water kayaking |
| <input type="checkbox"/> Half day (4 km) white water canoeing trip | <input type="checkbox"/> Half day (4 km) white water kayaking trip |
| <input type="checkbox"/> Full day (16 km) white water wilderness canoeing trip | <input type="checkbox"/> Full day (16 km) white water wilderness kayaking trip |
| <input type="checkbox"/> Introduction to river safety (tubing & boogie boarding) | <input type="checkbox"/> Abseiling |
| <input type="checkbox"/> Overnight/Multi day camping & white water wilderness trip | <input type="checkbox"/> Low Ropes Challenge |
| <input type="checkbox"/> Orienteering | <input type="checkbox"/> Initiative Games |
| <input type="checkbox"/> Bush walking | <input type="checkbox"/> Other _____ |

Package requirements

- | | |
|--|----------------------------------|
| <input type="checkbox"/> Cabin accommodation | <input type="checkbox"/> Camping |
|--|----------------------------------|

Program Objectives

Please provide a brief description for your camp objective and goals

Contact person

Phone number

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Please contact our centre if you would like to discuss your program needs and requirements on

Ph/Fax: 02 6649 4155