

AstroCamp Virginia Program Planner—Logistics

Page 1 of 2

Turn in to the Scheduler:

Email: Charlie@astrocamp.org **Fax:** (909) 625-7305 **Mail:** 8144 Mount Laurel Rd. Clover, VA 24534

School Name: _____

Trip Dates: _____ to _____

Lead Chaperone: _____

Phone (Daytime): _____

Address: _____

Fax: _____

City, State, Zip: _____

Email: _____

Time of Arrival (10:30-12:00): _____ **Transportation:** BUS and/or CAR #

Please answer the following questions:

1. Are there any concepts/standards you would like **emphasized** or **omitted** from our curriculum?
2. What classroom management/attention techniques does your school use (raised hand, etc.)?
3. Is there anything you would like our instructors to know about your students (special needs, ESL, GATE, etc.)? Please list below.
4. Do you have any other requests?

Enter the following information for Dorm and Research Group Assignments:

STUDENTS: Boys: _____ + Girls: _____ TOTAL: _____

ADULTS: Male: _____ + Female: _____ TOTAL: _____

GRADE(S): _____ How many times has your school visited AstroCamp Virginia? _____

Please complete the second page of this form

AstroCamp Virginia Program Planner

Class Preference Form

DAYTIME CLASSES			
Classes that span 1 period (1.5 hours) Atmosphere & Gases Cosmic Lander Craters Fundamental Forces Lights & Lasers		Classes that span 2 periods (3 Hours) Building & Launching Rockets Day Trip Options (Five Day Groups Only) <i>Day Trips span 4 class periods, choose a combination that equals 4 class periods</i> Advanced Rockets! (Spans 3 class periods) Field Day (Spans 1, 2, 3, or 4 class periods) Kart Driving (Spans 2, 3, or 4 class periods) Lake Day (Spans 1, 2, 3, or 4 class periods)	
NIGHT PROGRAMS			
AstroImaging Campfire	Interstellar Auction Night Hike	Space is Right Space Night	Whirling Windmills

Please fill out your preferences in the appropriate box below.

1 period = 1 ½ hour class. If a class is more than 1 period, write the class in the appropriate number of boxes below. (i.e. Building & Launching would be written under Daytime Classes 1&2)

3-DAY SCHEDULE			
Daytime Classes		Night Programs	
1	5	1	2
2	6	Alternates	
3	7	1	2
4	8	Daytime Free Swim?	
Alternates		(Extra Fee)	
1	2	YES	NO

5-DAY SCHEDULE			
Daytime Classes		Day Alternates	
1	9	1	2
2	10	Night Programs	
3	11	1	3
4	12	2	4
5	13	Night Alternates	
6	14	1	2
7	15	Daytime Free Swim? (Extra Fee)	
8	16	YES	NO

I have read the AstroCamp Virginia Planning Packet and agree to support the policies outlined therein.

Signature: _____

Date: _____

If you cannot meet the deadline in the Planning Packet Email, we will plan your classes for you.