

F. Limit on Participants. Due to space availability, CUSD reserves the right to limit the number of adult participants, in excess of the 1:10 ratio set forth in Section I.C., wishing to attend from a Group/School/District if the number of students or minor participants attending during the reservation period is significantly higher than the projected participant numbers listed in this Agreement at the time of signing. Paragraph J of Section I outlines the procedure for bringing additional students over the number indicated on the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: 1-25-2018

By: Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: September 24 - 28, 2018

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6th

Projected Number of Student Participants: 90

Number of Chaperones (1:10 Ratio): 6

Number of Teachers/Admin: 4

Teacher/Contact: Justin Cinfel

Teacher/Contact E-mail: jcinfel@centralusd.k12.ca.us

Contact Phone Number: (559) 276-3176

Authorization:

Participant Fee

\$266

Governing Board/Business Manager/Principal

Of Central Unified School District

Group/School/District

Title Chief Business Officer

By Kelly Porterfield

Print Signatory's Name

Authorized Signature

Date Signed

Governing Board Approval Date

PLEASE SIGN AND RETURN A COPY OF THIS AGREEMENT BY MAIL OR FAX TO:

**SIERRA OUTDOOR SCHOOL
15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address:

Name/School: Liddell Elementary

School District: Central Unified School District

Address: 5455 W. Alluvial Av

City/State/Zip: Fresno, CA 93722

Phone: 559-276-3176

Fax: 559-276-3181

Notes

Receipt Stamp

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F. Limit on Participants. Due to space availability, CUSD reserves the right to limit the number of adult participants, in excess of the 1:10 ratio set forth in Section I.C., wishing to attend from a Group/School/District if the number of students or minor participants attending during the reservation period is significantly higher than the projected participant numbers listed in this Agreement at the time of signing. Paragraph J of Section I outlines the procedure for bringing additional students over the number indicated on the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: 1-27-2018

By: _____

Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: October 3 - 5, 2018

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6th

Projected Number of Student Participants: 50

Number of Chaperones (1:10 Ratio): 5

Number of Teachers/Admin: 3

Teacher/Contact: Cindy Herrera

Teacher/Contact E-mail: cherrera@centralusd.k12.ca.us

Contact Phone Number: (559) 259-2100

Authorization:

Participant Fee

187.00

Governing Board/Business Manager/Principal

Of Central Unified School District

Group/School/District

Title Chief Business Officer

By Kelly Porterfield

Print Signatory's Name

Authorized Signature

Date Signed _____

Governing Board Approval Date _____

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15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address:

Name/School: Herndon-Barstow Elementary

School District: Central Unified School District

Address: 6265 N Grantland

City/State/Zip: Fresno, Ca 932732

Phone: 559-276-5250

Fax: 559-276-3111

Notes

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IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: _____

By: _____

Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: March 4-6, 2019

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6

Projected Number of Student Participants: 28

Number of Chaperones (1:10 Ratio): 4

Number of Teachers/Admin: 1

Teacher/Contact: Lindsay DeLong

Teacher/Contact E-mail: ldelong@centralusd.k12.ca.us

Contact Phone Number: (559) 276-5285

Authorization:

Participant Fee

187.00

Governing Board/Business Manager/Principal

Of Central Unified School District

Group/School/District

Title Chief Business Officer

By Kelly Porterfield

Print Signatory's Name

Authorized Signature

Date Signed _____

Governing Board Approval Date _____

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15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address: 8905 W Kearney Blvd

Name/School: Houghton-Kearney

School District: Central Unified School District

Address: 8905 W Kearney Blvd

City/State/Zip: Fresno/ CA/ 93706

Phone: (559) 276-5285

Fax: (559) 264-9557

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IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: 1-29-2018

By: Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: Mar. 4 - 7, 2019

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6

Projected Number of Student Participants: 95

Number of Chaperones (1:10 Ratio): 24

Number of Teachers/Admin: 5

Teacher/Contact: Krista Dose

Teacher/Contact E-mail: kdose@centralusd.k12.ca.us

Contact Phone Number: (559) 276-6001

Authorization:

Participant Fee

228.00

Governing Board/Business Manager/Principal

Of Central Unified School District

Group/School/District

Title Chief Business Officer

By Kelly Porterfield

Print Signatory's Name

Authorized Signature

Date Signed

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Governing Board Approval Date

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15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address:

Name/School: River Bluff Elementary

School District: Central Unified School District

Address: 6150 W Palo Alto

City/State/Zip: Fresno, CA 93722

Phone: 559-276-6001

Fax: 559-276-6006

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IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: 1-29-2018

By: _____

Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: March 13 - 15, 2019

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6th

Projected Number of Student Participants: 75

Number of Chaperones (1:10 Ratio): 8

Number of Teachers/Admin: 5

Teacher/Contact: Erin Gunstream

Teacher/Contact E-mail: egunstream@centralusd.k12.ca.us

Contact Phone Number: (559) 276-3131

Authorization: _____

Participant Fee 187.00

Governing Board/Business Manager/Principal

Of Central Unified School District
Group/School/District

Title Chief Business Officer

By Kelly Porterfield
Print Signatory's Name

Authorized Signature

Date Signed _____

Governing Board Approval Date _____

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15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address:

Name/School: Saroyan Elementary School

School District: Central Unified School District

Address: 5650 W Escalon Av

City/State/Zip: Fresno, CA 93722

Phone: (559) 276-3131

Fax: (559) 276-3135

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IN WITNESS WHEREOF, the parties hereto have executed this Agreement of the day and year set forth herein below.

CLOVIS UNIFIED SCHOOL DISTRICT

Dated: Feb. 22, 2018

By: _____

Michael Olenchalk

Michael Olenchalk, Director
Sierra Outdoor School

SCHOOL YEAR: 2018-2019

DATES OF ATTENDANCE AT THE SIERRA OUTDOOR SCHOOL: May 13 - May 15, 2019

Please complete the information below

FORMS NOT COMPLETEDLY FILLED OUT WILL BE RETURNED

GRADE LEVEL: 6th

Projected Number of Student Participants: 75

Number of Chaperones (1:10 Ratio): 10

Number of Teachers/Admin: 4

Teacher/Contact: Julie Shafer

Teacher/Contact E-mail: jshafer@centralusd.k12.ca.us

Contact Phone Number: (559) 271-0420

Authorization:

Participant Fee

\$175.00

Governing Board/Business Manager/Principal

Of Central Unified School District

Group/School/District

Title Chief Business Officer

By Kelly Porterfield

Print Signatory's Name

Authorized Signature

Date Signed _____

Governing Board Approval Date _____

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**SIERRA OUTDOOR SCHOOL
15700 OLD OAK RANCH ROAD
SONORA, CALIFORNIA 95370
FAX (209) 532-4196
QUESTIONS? (209) 532-3691**

Billing Address:

Name/School: Harvest Elementary

School District: Central Unified School District

Address: 6514 W Gettysburg

City/State/Zip: Fresno, CA 93723

Phone: 559-271-0420

Fax: 559-271-0767

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