

Volcano Outdoor School



Parent/Guardian Information Letter

Dear Parent/Guardian,

We are excited that your child is coming on a field trip to Mount St. Helens with Volcano Outdoor School! This field trip will be a great way for your child to learn about the natural world in an amazing volcanic setting and to further develop his/her critical thinking skills.

Please inform your Group Coordinator/lead teacher of any special needs or any other concerns NO LATER THAN 2 weeks before the program.

Please carefully review all the materials at the end of this letter:

- 1. Participant Waiver:** Complete and sign this form then return it to your Group Coordinator/lead teacher.
- 2. Participant Packing List**
- 3. Code of Conduct**

Other Helpful Information:

The Facilities: Volcano Outdoor School activities take place at either the [Science & Learning Center](#), the [Hummocks Trail](#), or the [Coldwater Lake Picnic Area](#). The Mount St. Helens Science & Learning Center (SLC) is the repurposed Coldwater Ridge Visitor Center nestled on a ridge above Coldwater Lake in the heart of the blast zone. The SLC is a collaborative effort between the Mount St. Helens Institute and the USFS Mount St. Helens National Volcanic Monument. Together, our goal is to connect people with nature through science, the arts, and adventure recreation. Learn more about the SLC [here](#).

What will we learn and do? While attending Volcano Outdoor School your child will be immersed in experiential, science-based instruction providing foundational knowledge, team building, interactive adventures and/or guided inquiry. Our lessons align with National Science Standards and the Mount St. Helens Institute works closely with teachers to modify and adapt programs as needed.

Staff and Supervision: MSHI staff are professional and caring individuals who are passionate about Mount St. Helens and youth education. During your child's visit, Mount St. Helens Institute staff will provide instruction. All staff undergo a criminal background check and extensive training. All MSHI staff at your program will be certified in First Aid & CPR. Teachers and chaperones will be responsible for supervising students and managing behavior throughout the program.

Our expectations of participants: While at the Volcano Outdoor School we expect your child to:

- Actively participate in activities and lessons
- Follow instructions of adults
- Respect students, staff, chaperones, themselves, the building and the landscape
- Behave in a safe and responsible manner
- Arrive prepared for a range of activities both indoors and outdoors
- Come with open and curious mind

Please review the Participant Waiver and the Participant Code of Conduct for grounds of dismissal.

Weather: Weather at Mount St. Helens is highly variable. The SLC located on a ridge at 3000 feet elevation. A 7-day weather forecast is available at www.weather.gov.

About Us: The Mount St. Helens Institute is private 501(c)3 organization dedicated to science, education and exploration of volcanic landscapes.

We offer activities for youth and adults all year long. We are proud to operate under a special use permit from the US Forest Service Gifford Pinchot National Forest, and are an equal opportunity provider. Learn more about the Mount St. Helens Institute and our programs including summer camps, field seminars, and guided hikes at www.mshinstitute.org.

Contact Information: In case of a family emergency while your child is at Mount St. Helens, parents/guardians may call the Science & Learning Center's landline at (360) 247-2114. If no one answers, please leave a message; voicemail will be checked. Please be aware that your group will not have cell phone coverage while at Volcano Outdoor School.

We look forward to meeting your child and having a wonderful learning adventure at Mount St. Helens!

The Mount St. Helens Institute Education Staff



Participant Packing List

Give to your Teacher/Group Coordinator:

- ☐ Your complete and signed [Participant Waiver](#)
- ☐ Personal prescription or over-the-counter medications

Bring With You:

- ☐ Sturdy shoes or tennis shoes (No open-toed shoes, no Keds/Converse)
- ☐ Lunch (if not provided by the school)
- ☐ Day pack or bookbag
- ☐ Water bottle(s); please bring water bottles that can hold a total of 2 liters.
- ☐ Rain jacket (especially in spring and fall)
- ☐ **Warm clothing (it gets cold near the volcano especially during the spring and fall)**
- ☐ Sun hat (especially in the summer)
- ☐ Warm hat (especially in the spring and fall)
- ☐ Sunscreen (especially in the summer)
- ☐ Extra pair of socks
- ☐ Gloves & scarf (especially in the fall)

* In cold/rainy seasons avoid cotton if possible. Materials such as wool or polyester will keep the students much warmer and dryer.

OPTIONAL ITEMS: sunglasses, camera (optional; phone cameras will be allowed at specific times), binoculars, journal, pencil

DO NOT BRING: guns, knives, any other weapon, alcohol or drugs, radio, music players, electronic games or equipment including cell phones, aerosol products, animals

Code of Conduct

The Mount St. Helens Institute wants you to have a great time at Mount St. Helens! To make sure everyone's visit is a safe and enjoyable one, we expect all participants to honor the following:

1. Let's keep this a safe place where no one gets injured.

- Turn in all medications to your teachers.
- Wear proper footwear (tennis shoes or hiking boots) while outside.
- Abide by all safety instructions given by MSHI staff.
- Wear shoes at all times in the dining area.
- Do not run indoors or on the Science & Learning Center deck.
- Do not climb onto structures or lean over the railing on the Science & Learning Center deck.
- Please wash your hands before all meals. Use hot water and soap.

2. Let's treat this amazing place with respect and practice the principles of Leave No Trace.

- Stay on the established trails unless your instructor indicates otherwise.
- Pick up your trash and put it in the proper container.
- Leave sticks, stones, and plants in nature where they belong.
- Return all animals we are studying to their proper homes.
- Respect all living things.

3. Let's treat one another with care and respect.

- Encourage your peers and do not use "put downs" or inappropriate words, or tease others.
- Respect other people's belongings, materials, and personal space.
- Respect each other's privacy. Do not enter the bunkroom of the opposite gender.

4. Let's make this a fun and exciting learning experience.

- Follow all program schedules and do your best to be on time.
- If you brought something you should not have, give it to your teacher right away.
- Do not use electronics at Volcano Outdoor School except to take photos.
- Be curious! Mount St. Helens rocks!

5. Let's treat the Science & Learning Center with care and respect.

- Food is not allowed in the SLC bunkrooms. If your group or individuals brings snacks, they may store them in the kitchen area. Ask a MSHI staff member for assistance.
- Help us to keep the place neat and clean by picking up after yourself.
- Treat exhibits at the Science & Learning Center gently and with respect.
- MSHI staff will let you know which parts of the building are off-limits. Stay out of these areas to respect others that use and share space at the Science & Learning Center.



VOLCANO OUTDOOR SCHOOL PARTICIPANT WAIVER

PLEASE READ THIS ENTIRE AGREEMENT CAREFULLY BEFORE YOU SIGN IT. YOUR SIGNATURE CONFIRMS THAT YOU UNDERSTAND AND AGREE TO ITS TERMS. BY SIGNING THIS AGREEMENT, YOU (YOUR FAMILY, AND YOUR CHILD) ARE GIVING UP LEGAL RIGHTS, INCLUDING THE RIGHTS TO SUE AND/OR RECOVER DAMAGES FROM ALL MSHI AFFILIATES FOR INJURIES, DEATH AND/OR PROPERTY DAMAGES ARISING FROM VOLCANO OUTDOOR SCHOOL PARTICIPATION, WHETHER CAUSED BY THE NEGLIGENCE OF MSHI, ITS PARTNERS, AND THEIR RESPECTIVE EMPLOYEES, OFFICERS, DIRECTORS, AGENTS, SPONSORS AND VOLUNTEERS ("MSHI AFFILIATES") OR OTHER PERSONS, OR OTHERWISE.

Please provide, legibly, all requested information. A parent or legal guardian must complete and sign below for his or her child. Incomplete and/or unsigned forms may delay or preclude program participation. MSHI expressly reserves the right to deny program participation to/dismiss any person who violates its rules.

School/Group: _____ City, State: _____
Participant is a: Minor Student ☐ Adult/Parent/Chaperone ☐ Adult/Teacher ☐

Participant Information

First Name: _____ Last Name: _____
Age: _____ Gender: _____

Parent/Guardian and Emergency Contact Information

Contact 1 Name: _____	Contact 2 Name: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____
E-mail: _____	E-mail: _____
Relationship to Participant: _____	Relationship to Participant: _____

Medical Conditions, Physical Conditions and Allergies (Attach Additional Pages if Necessary)

Do you or does your child have any medical conditions/physical limitations? ☐ No ☐ Yes; if so, list all below and, as appropriate, include health care provider contact information: _____

Do you or does your child have any allergies? ☐ No ☐ Yes; if so, list all below:

1) Type/Nature of Allergy (describe): _____

Severity of Allergy: ☐ Mild ☐ Moderate ☐ Severe ☐ Life Threatening

Description of Allergy and Treatment: _____

2) Type/Nature of Allergy (describe): _____

Severity of Allergy: ☐ Mild ☐ Moderate ☐ Severe ☐ Life Threatening

Description of Allergy and Treatment: _____

Liability Release Waiver and Indemnity Agreement | Initial each statement and sign at the form end

[Name] _____ has my permission to participate in MSHI's Volcano Outdoor School program. I am at least 18 years old and authorized to give this consent. I am aware that the United States Forest Service (USFS), the United States Geological Survey (USGS), and others are MSHI Affiliates.

_____ I acknowledge and understand that activities and schedules are subject to change / cancellation at the discretion of Mount St. Helens Institute Volcano Outdoor School and its staff.

_____ I understand none of the following will result in a refund of any participation fees: homesickness, illness, change of family/school plans, dismissal from program and/or personal schedule conflicts/changes.

_____ I understand it is my and/or my child's responsibility to participate cooperatively in the program including work, play, values sharing and living together. I agree to ensure that, at all times, I and/or my child abides by the rules of the program. I understand and agree to explain to my child that any violation of rules related (but not limited) to possession of any alcohol, drugs or tobacco products; possession of any weapon; inappropriate or offensive contact, behavior or communications to/with other participants or staff, such as racial, religious or sexual slurs or intimidation/violence/bullying; theft; vandalism; or unlawful conduct, will result in immediate dismissal from the program with no refund of program fees. If I or my child is dismissed, it is my or a parent's/guardian's responsibility logistically and financially to depart/retrieve his or her child.

_____ I understand that I or my child will participate in outdoor and indoor activities that include known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to me and/or my child, property or third parties. I and my child assume all risks of participation in these activities.

_____ If I or my child needs medical treatment, I consent and authorize accompanying representative(s) of MSHI/MSHI Affiliates to permit treatment. In case of emergency, I request and authorize any physician, hospital and health care provider to provide medical treatment promptly, whether or not I have been asked, informed and provided any additional consent. I agree to be responsible for and pay all medical treatment charges and to release, hold harmless, defend and indemnify the MSHI/MSHI Affiliates for such expenses.

_____ I understand that it is my responsibility to provide and maintain accident and health insurance for myself and my child while participating in all MSHI activities and programs, and understand and acknowledge that the MSHI does not provide any accident or health insurance coverage for its participants.

_____ I confirm that neither I nor my child has any physical, mental, emotional or other conditions that restrict or prevent me or my child from participating in the scheduled activities, or which increase the risk of harm, except: _____.

_____ I agree to release, waive, indemnify and hold harmless the MSHI, all MSHI Affiliates including, the USFS, the USGS and all others, and their respective directors, officers, instructors, employees, sponsors, agents, licensees, invitees, representatives, and volunteers (collectively, the "Releasees"), from all actions, claims, or demands that I and/or my child, and my/our legal representatives, heirs distribute, next of kin, guardians have, or may have in the future for injury, disability, death or property damage. This agreement includes, but is not limited to, claims or demands arising from injury or damage caused or allegedly caused by the negligence of one or more of the Releasees and/or MSHI program participants, guests or trespassers.

I am giving the consents, waivers and releases herein freely, with a full understanding of their meanings and consequences. I am at least 18 years old, am authorized to sign this agreement, and confirm this agreement binds me, my family and my child (or the child for whom I am signing as legal guardian and his/her family).

Parent's/Guardian's (or Participant's) Name: _____

Signature: _____ **Date:** _____

Photo Consent and Release

In support of the Mount St. Helens Institute's mission of advancing understanding and stewardship of earth through science, education, and exploration of volcanic landscapes, I hereby give my consent:

- a) to the Mount St. Helens Institute, and its affiliates and their agents to film, photograph, tape or otherwise make a video reproduction of me or my child/children and/or record our voice(s); and,
- b) to the Mount St. Helens Institute to use my name or my child/children's name and such film, photograph, tape or reproduction of us and/or recording of our voice(s), in part or in whole, in newspapers, magazines and other print media, on television, radio and electronic media (including the "Internet"), in theatrical media and/or in mailings for educational and awareness campaigns by the Mount St. Helens Institute, in connection with the promotion of Mount St. Helens products and/or to help raise funds for Mount St. Helens programs.

Consent to such use is given in perpetuity, and does not require prior approval by me. I further disclaim any right to receive compensation or economic benefit that has or could have become due in connection with the use of the film, photograph, tape or reproduction of me, my child/children and/or the recording of our voice(s).

I am giving the consents, waivers and releases herein freely, with a full understanding of their meanings and consequences. I am at least 18 years old, am authorized to sign this agreement, and confirm this agreement binds me, my family and my child (or the child for whom I am signing as legal guardian and his/her family).

CONSENT ON BEHALF OF A MINOR PARTICIPANT

Participant Name (print): _____

The below signed parent or legal guardian of the above-named minor child hereby consents to and gives permission to the above on behalf of such minor child.

Parent/Guardian Name (print): _____

Parent/Guardian Signature: _____ Date: _____

ADULT PARTICIPANT CONSENT

Participant Name (print): _____

Parent/Guardian Signature: _____ Date: _____