**James M Hill High School Outdoor Pursuits 110**

**Units:**

1. First Aid 10. Snowshoeing / X Country Skiing
2. Backpacking/Hiking 11. Cooking
3. Environmental Awareness 12. Equipment and Gear
4. Fitness 13. Winter Camping
5. Trip Planning 14. Survival / Shelters
6. Map, compass and GPS 15. Knots
7. Orienteering / Geo Cache 16. Climbing / Climbing Techniques / Rappelling
8. Leadership /Team Building 17. Canoeing
9. Archery 18. Mountain Biking

This class is an activity based course. We will be spending most of the time outdoors. There are also other activities that could be done depending on time, weather, availability, etc.

**Out Trips: (Subject to Change)**

Backpacking, Hiking, geo-caching, snow shoeing, x county skiing, canoeing, mountain biking, camping, etc.

* Students are required to keep a journal for all activities. Journals will include students’’ out trip experiences from personal and group dynamic perspectives.
* Students will be evaluated on practical skill associated with the Outdoor Activities
* Students are encouraged to attend all out trips. If you are unable to attend any of the scheduled trips you will be required to complete a major research assignment to complete the course requirements. Students should be prepared to attend outside of regular school hours.

**Evaluation:**

Practical and Written Assignments **Class Mark 30%**

Tests **Tests and Assignments 40%**

Term Assignment **Skills 30%**

Participation and Class Activities **\*There is no exam in this class \***

Skills Associated with Outdoor Activities

\*The weighting of marks may vary as this is the first semester for this course. If values are going to change you will be informed ahead of time.\*

**Fees:** Depending on the activity, you may be required to have to pay for individual expenses. (Example: food, ski rental, etc.)

**Outdoor Pursuits 110 Equipment Check List**

This class requires you to have some of the following items or have access to the following items. If something is needed you will be informed ahead of time. Some things will be provided by the school but others may be the responsibility of the student.

**Must have the following:**

-hard notebook for journal log, clothing for all seasons and weather, including winter boots, water bottle

**May want to have access to the following:** winter sleeping bag, basic camping gear, mug, plate, bowl, fork, ski’s, mountain bike, bike helmet, camera, cooler, tent, dry bags, snow shoes.

The class is held outside on a regular basis and if often off school grounds. Learning opportunites are found outside of the regular classroom with precautions taken to limit risk. Participation occurs in ALL weather and students are required to be prepared rain or shine. Students will be doing a variety of different activities and a cost may be incurred to help with equipment, gear, and travel expenses.

If you have any questions please contact Lindsay Tucker at lindsay.tucker@nbed.nb.ca or at the school 778- 6078.

I will also have my cell phone on me at all times when we are on out trips. In turn, I will also get all the students cell phone numbers to have on file and carry with me on out trips, in case of emergency.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have read the included information about James M. Hill’s Outdoor Pursuits class. I understand the risks associated with such a class and the outdoor activities. I give permission for my son/daughter to participate fully in this course and all activities. I also understand that there may be times when equipment or money is needed based on the activities.

Print Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Contact Information: Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Medical Issues or Concerns: