

**Water Environment Services (WES)  
Tour Request Form**

- Tours are available Tuesday – Thursday, between 9:30 AM – 1 PM. Please allow 45 minutes for each tour.
- Tour dates must be requested a minimum of two weeks in advance.
- WES reserves the right to cancel or reschedule tours due to availability of tour guides.
- Groups larger than 10 individuals will be divided into smaller groups, with a maximum of two tours per day.
- For safety, sturdy shoes are required. No sandals, flip-flops, etc. Long pants are required.

Please Print:

**NAME OF BUSINESS/AFFILIATION** \_\_\_\_\_

**NAME OF CONTACT** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

**CONTACT PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

**TOUR DATE/TIME REQUESTED** \_\_\_\_\_ **ALTERNATE DATE/TIME** \_\_\_\_\_

**NUMBER OF ATTENDEES** \_\_\_\_\_

**RECOMMENDED TOURS:**

- Tri-City Water Pollution Control Plant
- Tri-City Membrane Biological Reactor (MBR) Plant
- Tri-City Water Quality Lab
- Kellogg Water Resource Recovery Facility
- Hoodland Sewage Treatment Facility
- Boring Sewage Treatment Facility

**SPECIAL ACCOMODATIONS REQUESTED** \_\_\_\_\_

\_\_\_\_\_  
**RESPONSIBLE PARTY SIGNATURE**

\_\_\_\_\_  
**DATE**

Please return this completed request form and any questions you may have about the tours, our processes or organization to the attention of: **Kim McRobbie** via: **Email** [kmcrobbie@clackamas.us](mailto:kmcrobbie@clackamas.us)  
**Fax** 503-557-2809 **Mail** 15941 S Agnes Avenue, Oregon City, OR 97045



## ***GROUP PHOTOGRAPH RELEASE***

***Program:*** **SPEAKER'S BUREAU & TOURS**

***Project:*** \_\_\_\_\_

I have participated as indicated on the above project which I understand may be printed and distributed to citizens, partners and other government agencies. I expressly release Clackamas County Water Environment Services from any privacy claims I may have arising out of the use of my photograph or likeness.

***Print Group Name:*** \_\_\_\_\_

***Print Group Contact Name:*** \_\_\_\_\_

***Signature:*** \_\_\_\_\_

***Address:*** \_\_\_\_\_

***City, State, Zip:*** \_\_\_\_\_

***Telephone Number:*** \_\_\_\_\_

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

**The individuals listed below do not wish to be photographed: (please print)**