

# North Branch Trekkers



## Registration Form

North Branch Nature Center  
713 Elm Street  
Montpelier, VT 05602  
(802)229-6206

### General Information

Child's Name \_\_\_\_\_

Entering Grade \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Birth Date \_\_\_\_\_

Parents/Guardians' Names: 1) \_\_\_\_\_  
2) \_\_\_\_\_

Home Address: 1) \_\_\_\_\_ 2) \_\_\_\_\_  
\_\_\_\_\_

Telephone: 1) (day) \_\_\_\_\_ (evening) \_\_\_\_\_

2) (day) \_\_\_\_\_ (evening) \_\_\_\_\_

E-Mail: 1) \_\_\_\_\_

2) \_\_\_\_\_

### Emergency Contacts

If we cannot reach the Parent/Guardian listed above, please provide back up contacts:

	Name	Phone	Relation
1.	_____	_____	_____
2.	_____	_____	_____

### Pick Up Advice

People authorized to pick up your child (in addition to parents/guardians)

\_\_\_\_\_  
\_\_\_\_\_

Please note: Under no circumstances will we release your child to anyone other than those names listed above or parents/guardians. If you wish to add a name to your list, please talk with the NBNC instructors.

Over, please.

**Photo Release**

I authorize the North Branch Nature Center to use any photographs taken of my child for future NBNC publicity.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Medical Information**

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Health Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Medical History: Does your child have any medical conditions that would affect his/her participation in our program? \_\_\_\_\_  
\_\_\_\_\_

Medications  
\_\_\_\_\_

Allergies \_\_\_\_\_

Does your child have any special needs or behaviors we should be aware of? What techniques do you recommend for your child?  
\_\_\_\_\_  
\_\_\_\_\_

**Parental Authorization Statement**

In the event you are unable to reach a parent/guardian or emergency contact by phone while my child is at NBNC, I hereby authorize NBNC staff or medical personnel to take emergency measures as needed.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NBNC Release Statement**

As a parent of \_\_\_\_\_ (child's name), I understand:

- My child is in generally good health.
- Although NBNC staff will exercise many cautions to prevent mishaps (including adequate adult supervision, extreme care in potentially dangerous situations, clear communication with children), injuries are still possible. Provided adequate cautions have been taken by NBNC staff, I will assume all risks of injury, hereby releasing and holding harmless NBNC, its employees or agents from liability for any such injury.

Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

***Parents, please note: We will keep this form on file for one year. If any information changes before that year is up, please be sure to notify us. After one year, you will be asked to complete a new form for your child. Thank you very much. North Branch Nature Center staff***

## **Payment**

### **North Branch Trekkers**

Wednesdays, March 8<sup>th</sup> to May 31<sup>st</sup>, 3pm to 5:30pm (April 19<sup>th</sup> off for Spring Break)

*Program Fee:* \$410 (includes \$200 Deposit)

*Payment Plan:* If necessary, the program fee minus the deposit may be broken into two payments of \$105, with the first due on March 8<sup>th</sup> and the second due on May 10<sup>th</sup>.

Upon receiving your deposit and completed registration form, your child will be registered for North Branch Trekkers after school program. Registration will be taken on a first come, first served basis. Once we have reached our maximum of 8 students, additional registrants will be wait listed. Registration forms and deposits must be received at least one week prior to the program start date. Payment may be made in full on the first day of Explorers.