



# YOUNG BIRDERS REGISTRATION FORM

## How to return this form:

• **Email**

Please send PDF version of form to [youngbirders@seattleaudubon.org](mailto:youngbirders@seattleaudubon.org)

• **Mail**

Seattle Audubon ATTN: Young Birders  
8050 35<sup>th</sup> Ave NE  
Seattle, WA 98115

## Participant Information

Name (First, Last): \_\_\_\_\_

Gender: *Male* *Female* *Prefer not to say* *Prefer to self-describe*: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

School \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Owner of Phone: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_ Owner of Phone: \_\_\_\_\_

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

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

<b>For Office Use Only:</b>	
Participant: _____	
Trip(s): _____	
Media Release: Y N	Epi-pen: Y N
Meds: Y N	Diet Restriction: Y N
	Other: _____

## Parent/Guardian Information

Parent or Guardian Name(s): \_\_\_\_\_

Address (if different from participants): \_\_\_\_\_  
\_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Owner of Phone \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_ Owner of Phone \_\_\_\_\_

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

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

## Emergency Contact Information

Student's name: \_\_\_\_\_ Parent or Guardian's name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

### Person to contact in case of emergency if above can't be reached:

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

### If student has a second parent living at a different address, please include this parent's name and address:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Alternate emergency contact (in case other contacts can't be reached):

Name \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Plan (including ID#) \_\_\_\_\_

Please list all medical conditions, medications\*, allergies, and dietary restrictions. Please also mention any restrictions on hiking/outdoor activities (*Please note: This information will be kept confidential*):

**\* It is VERY important that we have a complete record of all medications and medical conditions**

Other health-related comments:

\_\_\_\_\_  
Signature of Parent or Guardian

Date \_\_\_\_\_

## Young Birder's Health Concerns

Does your Young Birder have **allergies** to nature, food, or medications? If yes, please list, and describe severity, typical reaction, and treatment.

Does your Young Birder require an **Epi-pen**? If yes, please see Page 3.

Does your Young Birder have any **dietary restrictions**? If yes, please describe.

Does your Young Birder need any **special accommodations**? If yes, please describe.

## Young Birder's Health Concerns (continued)

Please list any **additional medical concerns** for your Young Birder (including behavioral or developmental difficulties, recent injuries or illnesses, etc.).

Is your Young Birder currently taking any **medications**? If yes, please list. (If medications need to be administered while at camp, please see Page 3.)

# Seattle Audubon Society

## Release and Medical Authorization Form

### **Permission and Liability Release:**

I hereby give my consent for \_\_\_\_\_ (name of participant) to participate in the Seattle Audubon Society (SAS) Young Birder program, including off-site field trips and other activities that may include transportation in rented vans, hiking and bird watching in a variety of rugged environments, including but not limited to, marshes, deserts, and beaches, possibly in inclement weather. I declare that I will not hold SAS, its employees, board, or any volunteers responsible for any injuries, damage or personal loss incurred while participating in this program. Further, we agree to indemnify, hold harmless, pay and defend SAS, its employees, board, and volunteers from any claims by the participant arising from his/her participation in SAS programs.

The undersigned and the above-named participant are aware that safety regulations are applicable to the above program and hereby agree to comply with such regulations and all directions of instructors and/or other personnel in charge of the program.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/guardian)

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

### **Medical Authorization:**

I understand that the Seattle Audubon Society (SAS), its staff, and all persons related directly or indirectly with the SAS assume no financial obligation or liability; but in the case of accident or illness, I grant my authorization to secure medical treatment for the above-named if I cannot be contacted immediately. I hereby consent to the administering of any and all medical procedures deemed necessary by the attending authorities.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/guardian)

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

### **Photo Release:**

I hereby grant permission for publishing, in the SAS Earthcare Northwest monthly newsletter, promotional brochures, other publications, film, television or other electronic media, any footage, pictures or sound in which the above named participant appears. Understanding that reasonable attempts will be made to notify the participant/parent prior to use of full names, I additionally consent to the use of the participant's name with these media releases.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/guardian)

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

# YOUNG BIRDERS GENERAL PROGRAM INFORMATION

## Young Birders Participation Minimum Requirements

- Attend at least one meeting (weekday evenings, day TBD) during the year
- Attend two field trips (generally on weekends)
- 6 hours of volunteer service (chosen from a variety of days and times)

## Students who meet the minimum participation requirements will receive

- A minimum of 6 hours of service-learning credits
- Priority, if available, for internships and summer Junior Naturalist positions with Seattle Audubon
- Priority for overnight field-trips

**To be a Young Birder with Seattle Audubon, participant OR family of participant must be a member. Membership dues are \$40 for one year for a family membership OR \$10 for one year for a youth membership.**

## Payment Information

Renewing Member?     New Member?

Family Membership (\$40)     Youth Membership (\$10)

Cash     Check no. \_\_\_\_\_

Credit Card

Visa     MasterCard     Discover     AmEx

Card No: \_\_\_\_\_

Expiration (MM/YY) \_\_\_\_/\_\_\_\_

Name as it Appears on card: \_\_\_\_\_

Signature:

\_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

## Thank you for your interest in Young Birders!

If you have any questions or concerns, please contact **Malcolm Griffes or Robyn Thomas**, Seattle Audubon Education Coordinator, via email ([youngbirders@seattleaudubon.org](mailto:youngbirders@seattleaudubon.org)) or by phone (206-523-8243 x117)

