

## JUNIOR NATURALIST PROGRAM - REGISTRATION FORM

### PART 1 - CHILDS NAME / ADDRESS

\_\_\_\_\_  BOY  GIRL  
 LAST NAME FIRST NAME

\_\_\_\_\_  
 MAIL ADDRESS CITY PROVINCE / STATE POSTAL / ZIP

( ) ( ) / /  
 PHONE NUMBER ALTERNATE PHONE NUMBER BIRTH DATE ( DD/MM/YYYY )

### PART 2 - PROGRAM DATES / TIMES

**DATE OF PROGRAM** \_\_\_\_\_

**MORNING**  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  
**AFTERNOON**  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY

### PART 3 - MEDICAL INFORMATION

Allergies: \_\_\_\_\_

Other: \_\_\_\_\_

Parent / Guardian's name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address (in park): \_\_\_\_\_

### PART 4 - FOR OUR INFORMATION

**We are interested to know:**

*How did you hear about this program?*

Visitor Centre  Last year  Poster  Friends of the Park  Word of mouth  
 Nature Shop  Rural Forum  Mall display  Other \_\_\_\_\_

*The price of this program is:*  Appropriate  Too high  Too low

### PART 5 - PAGE 1 SIGNATURE

I agree the information given on this form is accurate.

\_\_\_\_\_  
 X SIGNATURE OF PARENT OR GUARDIAN (IF PARTICIPANT UNDER 19 )

*Reverse side (page 2) of registration form must also be completed >>*

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### PART 6 - REGULATIONS

- Refunds will not be given after 10:20 a.m. (morning sessions) or 1:50 p.m. (afternoon sessions)
- On the day of your child's program, make sure that he/she is signed in by 9:55 a.m. (morning sessions) or 1:25 p.m. (afternoon sessions)
- Children must be signed out by 12:00 p.m. (morning sessions) or 3:30 p.m. (afternoon sessions).
- Children must be signed in and out by the same Parent/Guardian. Children can not sign themselves in or out of the program.

I have read and understand the regulation of the program:

\_\_\_\_\_  
X SIGNATURE OF PARENT OR GUARDIAN (IF PARTICIPANT UNDER 19 )

### PART 7 - RELEASE OF PUBLICITY AND PRIVACY RIGHTS

I, \_\_\_\_\_, agree to the use of my likeness, or a representation of my likeness (such as sketches or photographic adaptations), in materials developed by or on behalf of Friends of Riding Mountain National Park and Parks Canada, or licensed by Friends of Riding Mountain National Park or Parks Canada, including posters, photographs, videos, films and multi-media products. I release Friends of Riding Mountain National Park and Parks Canada and their licensees from all liability for any claim of infringement of publicity or privacy rights that I might otherwise have had in connection with the use of my likeness, or a representation of my likeness.

I also agree that my likeness or representations of my likeness may be exhibited, shown or reproduced in any media, whether in Canada or elsewhere.

\_\_\_\_\_  
PRINT NAME OF PARTICIPANT / MODEL

\_\_\_\_\_  
X SIGNATURE OF PARTICIPANT / MODEL

\_\_\_\_\_  
X WITNESS

\_\_\_\_\_  
X SIGNATURE OF PARENT OR GUARDIAN (IF PARTICIPANT UNDER 19 )

\_\_\_\_\_  
DATE