



# Nature Learning Community

**Edible Plant Walk with George Hedgepeth**  
**May 4, 2013, 10-4 pm**

## Registration & Release Form (one per family)

Adult's Name \_\_\_\_\_ \$45\_\_\_\_  
Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home phone \_\_\_\_\_  
Email \_\_\_\_\_

Adult's Name \_\_\_\_\_ \$45\_\_\_\_  
Address (if different from above) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home phone \_\_\_\_\_  
Email \_\_\_\_\_

Children 13+ \$45 each, 5-12 yrs \$22.50, under five free!

Child's Name \_\_\_\_\_ 13+ \$45\_\_\_\_  
m/ f Age \_\_\_\_\_ 5-12 \$22.50\_\_\_\_

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m/ f Age \_\_\_\_\_ 5-12 \$22.50\_\_\_\_

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m/ f Age \_\_\_\_\_ 5-12 \$22.50\_\_\_\_

Child's Name \_\_\_\_\_ 13+ \$45\_\_\_\_  
m/ f Age \_\_\_\_\_ 5-12 \$22.50\_\_\_\_

(To register additional children in the same family, please use a second registration form.)

TOTAL \_\_\_\_\_ Date \_\_\_\_\_

*Checks can be made out to Ann Arbor Nature Class, LLC*

*Please send registration form with payment in full to:  
Rowena Conahan, PO Box 3333, Ann Arbor, MI 48106-3333*

(Release form on back must be signed)

**Release/Waiver for first adult participant**

I am aware that certain hazards are present in nature, including insect and animal bites and stings, low-lying branches, slippery surfaces, plants such as stinging nettles and poison ivy, lightening, and others. I take responsibility for attending to these and other hazards during class and doing my best to be safe. I give permission for Ann Arbor Nature School personnel to seek medical treatment for me if necessary and I agree to be responsible for the costs associated with treatment. I release Ann Arbor Nature School personnel from liability for any accidents that may occur during class.

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

Name (printed) \_\_\_\_\_

**Release/Waiver for second adult participant**

I am aware that certain hazards are present in nature, including insect and animal bites and stings, low-lying branches, slippery surfaces, plants such as stinging nettles and poison ivy, lightening, and others. I take responsibility for attending to these and other hazards during class and doing my best to be safe. I give permission for Ann Arbor Nature School personnel to seek medical treatment for me if necessary and I agree to be responsible for the costs associated with treatment. I release Ann Arbor Nature School personnel from liability for any accidents that may occur during class.

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

Name (printed) \_\_\_\_\_

**Release/Waiver if under 18**

I am aware that certain hazards are present in nature, including insect and animal bites and stings, low-lying branches, slippery surfaces, plants such as stinging nettles and poison ivy, lightening, and others. I understand that I will be required to attend class with my child/ren to help him/her/them be aware of these hazards. I give permission for Nature Class personnel to seek treatment for my child and I agree to be responsible for the costs associated with treatment. I release Nature Class personnel from liability for any accidents that may occur during class.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (printed) \_\_\_\_\_

**Photo Release**

\_\_\_\_ Yes, I grant permission to use photographs of myself and/or my child participating in Nature Class for outreach purposes, including electronic and print materials.

Sign here for photo release permission \_\_\_\_\_

\_\_\_\_ No, I do not grant permission to publish photos.

**Emergency Contact**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home phone \_\_\_\_\_