

New York State Young Birders Club Field Trip Permission Form – 2010
(required for all participants under age 18)

Student's Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Parent's Cell Phone _____ Student's Cell _____

How will student get to and return from these events? (check all that apply) Car Public Transport. Walk

Other (please explain): _____

If by car, who will be driving? _____ Relationship to student _____

I hereby give permission for the above named young birder to participate in the field trips marked "Yes" below of the New York State Young Birders Club (NYSYBC), a program of the New York State Ornithological Association, Inc. (NYSOA). I assume all risks and hazards incidental to the activities of the event and transportation to, from, and during the event. I further release, absolve, indemnify, and hold harmless the New York State Young Birders Club, the New York State Ornithological Association, and all organizers, sponsors, leaders, chaperones, and supervisors of the event. In case of injury, I hereby waive all claims against all organizers, sponsors, leaders, and supervisors. I likewise release from responsibility any person transporting my child to, from, and during the scheduled activities.

Jamaica Bay 8/14/10 Yes No

Central Park 9/26/10 Yes No

Walkkill River NWR 10/10/10 Yes No

Trip information available at www.nysyoungbirders.org. Also watch for email updates. Student must confirm attendance & transportation information by registering via email.

Name of parent or legal guardian (please print): _____

Signature of parent or legal guardian

Relationship to student

Date

Address (if different from above)

Home/office phone (if different from above)

City, State, Zip (if different from above)

Note: Parents are encouraged to participate in field trips and other NYSYBC activities!

Consent to Use of Photographs

From time to time throughout the year, an occasion may arise where we would like to publish a photo of the young birder named above in the newspaper, NYSOA and/or NYSOA member club newsletter and/or website, NYSYBC newsletter and/or website, or a similar publication. By signing below you are giving us permission to publish such photographs.

Young Birder's Name _____

Signature of Parent or Guardian _____ Date _____

QUESTIONS? Email NYSYBC's Adult Coordinators at ycb@nybirds.org

PLEASE FAX to: (845) 724-3431 **or SCAN & EMAIL to:** ycb@nybirds.org
or mail completed form to: NYSOA-NYSYBC, PO Box 363, Poughquag, NY 12570