



## NIORRARA COUNCIL

PO Box 206; 365 N Main Valentine, NE 69201  
Contact: Wendy Murphy, Education Director  
murphy@niobraracouncil.org  
Phone: (402) 376-2793



The Niobrara Council and Niobrara Valley Outdoor Education Partnership (NVOEP) will be hosting Niobrara After-school Nature Club as a **FREE** afterschool program once a week for 5-weeks. The first session will be for K-2 graders; session 2 will be for 3-5 graders.

**Who:** *All youth in grades K-2*

**When:** Sept 10 – Oct 8

3:30 p.m. – 5:00 p.m. Tuesdays

**Who:** *All youth in grades 3-5*

**When:** Oct 15 – Nov 12

3:30 p.m. - 5:00 p.m. Tuesdays

**Where:** Ainsworth Elementary School, 520 E 2nd St, Ainsworth, NE 69210

**Goal:** Connect with local youth who have a passion for the environment and outdoors; to create structured, regular, hands-on learning opportunities specific to the Niobrara National Scenic River.

Registration forms are available at the school, on the Council website at <http://niobraracouncil.org> or at the Niobrara Council Office at 365 N Main St. and are due by **September 4.**

**\* Please fill out a separate form for each child.**

**1) Please fill out a separate form for each child.**

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

Work Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Conditions or Allergies**

Food allergies: \_\_\_\_\_

Insect allergies: \_\_\_\_\_

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

Conditions: (Asthma, diabetes, etc.) \_\_\_\_\_

**Emergency Contacts: (If parent/guardian cannot be reached)**

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**2) Complete and sign the liability waiver on the reverse side of this application.**

**3) Return this form (with both sides completed) to the Niobrara Council office by Sept. 4.**

**Questions?** Contact Wendy Murphy at (402) 376-2793 or [murphy@niobraracouncil.org](mailto:murphy@niobraracouncil.org)

PERMISSION TO PARTICIPATE IN NATURE CLUB ACTIVITIES  
SPONSORED BY NIOBRARA COUNCIL  
AND  
AGREEMENT FOR RELEASE OF LIABILITY

TO: NIOBRARA COUNCIL, Valentine, Nebraska

RE: Release of Liability and Permission to Participate in Niobrara After-school Nature Club Activities

DATE: \_\_\_\_\_

THE UNDERSIGNED, in consideration of opportunity and license to participate in Nature Club sponsored by and provided by Niobrara Council, Valentine, Nebraska, do hereby grant to my child \_\_\_\_\_, permission to participate in the activities designed for the Nature Club through the Niobrara Council. I furthermore acknowledge, understand and agree that I am familiar with the possible risks associated with the Niobrara River and unfamiliar lands, together with the activities of the Niobrara Council within the Scenic River Corridor; and in traveling to and from the same, and I do hereby release Niobrara Council, its staff, employees, agents and assigns from any liability whatsoever, including costs of defense, and expenses and attorneys' fees incurred, for any injuries that my child or myself may suffer during or as a result of participation in, attendance at and travel to and from Niobrara Council Nature Club activities. I further certify that I have made my own independent evaluation of the dangers and hazards associated with such activities and am familiar with the consequences of this release.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND THIS \_\_\_\_ DAY OF \_\_\_\_\_, 2019.

\_\_\_\_\_  
**Parent Signature**

(NOTE: Alternatively, custodial parent or legal guardian as provided by Court of competent jurisdiction must sign.)

My Child will be:

\_\_\_\_ Walking home on their own after Nature Club

\_\_\_\_ Picked up after Nature Club

(Please list all persons and their relation that are authorized to pick your child up from Nature Club)

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

\_\_\_\_ I give permission to use my child's name/photograph in publications, advertisements, Niobrara Council webpage or news articles pertaining to Niobrara Council camp activities.

\_\_\_\_ I do NOT give permission to use my child's name/photograph in publications, advertisements, Niobrara Council webpage or news articles pertaining to Niobrara Council camp activities.

**Please initial the following statement:**

\_\_\_\_ As the parent/guardian of the participating child, I understand that health insurance coverage is my own responsibility.