

PO Box 206, 365 N Main, Valentine, NE 69201
Contact: Wendy Murphy, Programs Assistant
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Registration for 2019 Niobrara Nature Club April 2 – May 7, 2019 – Keya Paha Schools -

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 School office by March 25.

Niobrara Council
PO Box 206, 365 N Main St
Valentine, NE 69201

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 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/Guardian

Parent/Guardian

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

____ Will be 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.