

PROGRAM WAIVER (Use Front and Back!) for year 2018
Friends of the Rio Grande Nature Center State Park
Nature Discovery for Kids Program

- Only one waiver is necessary per child per year. Please request a new one if information changes.
- Deliver, mail, or fax this form, attached to the registration form, to: Rio Grande Nature Center State Park, 2901 Candelaria Road NW, Albuquerque, NM 87107. Fax number is (505) 344-4505.
- Questions? Call (505) 344-7240.

Name of Child: _____ Age: _____

Name of Parent or Guardian to Contact: _____

Best Daytime Phone: _____ Best Alternate Phone: _____

Address _____ Email _____

City, State, Zip _____

Emergency Contact # 1 (other than person listed above): _____

Best Daytime Phone: _____ Best Alternate Phone: _____

Emergency Contact # 2 (optional): _____

Best Daytime Phone: _____ Best Alternate Phone: _____

Child's Doctor: _____ Phone: _____

Does your child have special needs the teachers must know about? YES _____ NO _____
If YES, please check the appropriate statement(s) and tell us what we should know and be prepared to do. If NO, please leave bottom section blank and move to back of page.

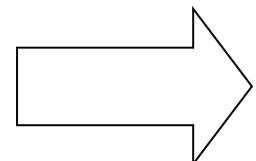
****Front Desk Volunteer: Notify Contact Teacher(s) for the class(es) if any of these statements are checked and be sure the back of the page is completed. The Contact Teacher's phone number is listed on the class roster in the Children's Program Binder.****

_____ **My child needs these special accommodations to attend Nature Discovery Classes:**

_____ **My child has allergies the teachers must be aware of:**

_____ **Please have the Nature Discovery teacher call me before the first class.**

Please turn over to complete the form.



Back of PROGRAM WAIVER

AGREEMENT, WAIVER, AND RELEASE

I, _____, acting for the participant, and having carefully read this agreement, acknowledge that I understand its contents and agree to be bound by all of the terms and conditions set forth herein. The signature at the end of this agreement indicates my understanding and commitment to the agreement.

Parents are reminded that every reasonable precaution will be taken to provide for the safety and care of the participant. In the event of an accident requiring emergency care, necessary arrangements will be made. However, parents must assume financial responsibility.

The participant and/or person signing this waiver understands that there are certain risks and dangers involved and will ensure that the participant is properly clothed and outfitted.

THE UNDERSIGNED HEREBY WAIVES any and all claims that he or she may have against the State of New Mexico, Energy, Minerals and Natural Resources Department, State Parks Division, Friends of the Rio Grande Nature Center State Park, program leaders and volunteers, and forever releases the same, EXCEPT THAT the foregoing waiver and release is not effective if the claim is caused by a tortious act or omission of the State of New Mexico, Energy, Minerals & Natural Resources Department, State Parks Division.

Signature of participant or parent/guardian for minor child/ward:

X _____ Date _____

AUTHORIZATION FOR MEDICAL SERVICES (FOR MINORS ONLY)

I/We, parent(s)/guardian(s) of _____ (name of child/ward), hereby designate the program leader or his/her designee to act in my behalf to authorize such hospitalization, medical attention, and/or surgery as may be required in an emergency because of illness or injuries sustained by my/our child/ward while participating in Friends of the Rio Grande Nature Center State Park activities. I/We hereby assume financial responsibility for hospitalization, medical attention, transportation, and surgery provided. I/We request that I/We be contacted within a reasonable time in the event of illness or injury requiring medical services.

Parent or Guardian X _____ Date _____

Please initial the following statements after you have read the separate sheet “2018 Information for Parents and Guardians”.

___ I have read and understand the Information for Parents and Guardians.

___ I understand the refund policy for the Nature Discovery Program.

(Please be sure you have filled out the front of this page.)