



# Young Naturalists' 2016-2017 Year-at-a-Glance

Welcome to the Young Naturalists!!!!

The Young Nats Club is for boys and girls ages 7 to 12 years old. Younger and older children are welcome, however ages under 7 must be accompanied by an adult during each meeting. We meet on the last Sunday of each month at the Grey Sauble Conservation Administration Centre located at 237897 Inglis Falls Road from 2:00 pm until 4:00 pm (please note offsite trips are planned). The program operates from September to May—(no meeting in December). Parents or guardians are welcome to stay and participate or volunteer if they wish.

Please fill out the registration form and return them to our office.

\*\*\*Registration will be based on first come first served basis. Cost is \$20 per person or \$30 for a family plus Field Trip Costs.

Proper clothing and footwear is recommended—be prepared for mother nature!

## The Proposed Year at a Glance

### September 25—Registration at 2:00

- Hike the Sydenham River, visit the Salmon Spawning Channels
- Clean out Bluebird Boxes

### October 30

- Meet at the Administration Centre, hike to the Fish Hatchery

### November 27

- The Secrets of World of Blueberries!!
- Meeting at 504240 Grey Road #1 just east of Big Bay Store



No Meeting in December

### January 29 (meeting at Bognor Marsh)

- Snowshoeing/or hike at Bognor Marsh, Camp Fire, cook bannock, and drink hot chocolate
- (Directions to Bognor Marsh (east of Rockford, parking on 4th Conc. South Sideroad)

### February 26

- (meeting at the Pottawatomi Memorial Forest on Young's Drive)
- Snowshoeing at Pottawatomi Conservation Area

### March 26

- To be announced

### April 30 (Meeting at Administration Centre)

- Hike to Inglis Falls and visit 2 dams and the Inglis Falls Filtration Plant

### May 28

- Bognor Marsh Management Area
- Spring WAKE UP—Let's see what's going on at Bognor!
  - Tracks, Turtles and Snake Tails



The Young Naturalist Club is a cooperative program between the Owen Sound Field Naturalists and Grey Sauble Conservation. Program Coordinators are Krista McKee, Grey Sauble Conservation and Elaine VanDenKieboom, Owen Sound Field Naturalists.

For further Information, please contact:

Grey Sauble Conservation (Young Nats), c/o Krista McKee  
R.R.#4, 237897 Inglis Falls Road, Owen Sound, Ontario N4K 5N6  
519 376-3076 ext 224 or download registration forms from [www.greysauble.on.ca](http://www.greysauble.on.ca)



Child (ren)'s Surname: \_\_\_\_\_

# The 2016-2017 Young Naturalists' Club

## Registration Form and Emergency Health Information

c/o Grey Sauble Conservation, 237897 Inglis Falls Road, R.R.#4, Owen Sound, Ontario T519 376-3076 F519 371-0437

Please fill out the entire registration form and return to the Grey Sauble Conservation Administration Centre prior to the first meeting. Registration is based on first come first served basis. Cost: \$20 per person or \$30 for a family (and becomes a Owen Sound Field Naturalist Member) and field trip costs Cheques payable to Owen Sound Field Naturalists at the September meeting

**REGISTRATION:** For children ages 7 – 12 (children ages 5 to 6 can attend with a parent)

1. Child's First Name: \_\_\_\_\_ Birth Date \_\_\_\_\_  
D / M / Y
2. Child's First Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
D / M / Y
3. Child's First Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
D / M / Y

Father/Guardian Name	Cell Telephone Number	Home Telephone Number
Mother/Guardian Name	Cell Telephone Number	Home Telephone Number
Address	City	Postal Code

**\*E-mail Address \_\_\_\_\_\*** Please note I will be using e-mail to remind you about our next months' activities or cancellations because of weather, eg. Snow storms

**Emergency Health Information:** Please fill in this portion so that if a medical emergency arises we can take appropriate action.

Allergies: \_\_\_\_\_

Health Card Number (s) : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Child #1 Child #2 Child #3

Family Doctor: \_\_\_\_\_ Phone No. \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone No. \_\_\_\_\_  
(if you are unreachable)

In case of a medical emergency, I give permission to have my child(ren) taken to the nearest hospital or medical centre. \_\_\_\_\_

Signature of Parent or Guardian

Date

**Photographs** - In the event that photographs may be taken of myself or my children during the course of participating in The Young Naturalists Club, I \_\_\_\_\_ (please circle one) do give permission/ do not give permission for these photos to be displayed or publicized at a later date.

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
Date

## WAIVER AND ASSUMPTION OF RISK

I \_\_\_\_\_, wish to have my child/ren \_\_\_\_\_  
(Parent/Guardian Name) (Child/rens Name/s)

Participate in the above noted program, co-hosted by Grey Sauble Conservation and the Owen Sound Field Naturalists. As part of registering my child/ren, I hereby agree as follows:

1. I acknowledge that I am aware of the risks associated with this activity and the possibilities of accident or injury which are inherent in this type of activity. I declare that my child/ren is fully covered by medical, dental and hospital insurance, including emergency treatment, and that I am fully protected in the case of an accident to my child/ren.
2. That I acknowledge that there are inherent risks associated with this activity and that my child/ren could sustain personal injury through participation in this activity and I am hereby accepting to take that risk on behalf of myself and my child/ren.
3. To save harmless and keep indemnified the Owen Sound Field Naturalists and the Grey Sauble Conservation Authority and their respective agents, officials, servants and representatives from and against all claims and actions, costs and expenses and demands, in respect of injury, loss or damage or death to myself or my child/ren's person.
4. That I affirm that my child/ren is in good health, capable of participating in the program and activities of the Young Naturalists Club, and I accept personal risk on behalf of myself and my child/ren for the consequences of such participation.
5. That I agree that my child/ren will follow the rules and guidelines of the Young Naturalists Club.
6. In the event of an accident or medical problem suffered by my child/ren, I consent to the Young Naturalists Club leaders seeking out the appropriate medical care.
7. That I declare this Waiver and Assumption of Risk is binding on me, my child/ren, my heirs, executors, administrators and assigns.

I have read this Waiver and Assumption of Risk and I fully understand all aspects of it.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

If you have questions, please contact Krista McKee at 519 376-3076 ext 224 or e-mail at [k.mckee@greysauble.on.ca](mailto:k.mckee@greysauble.on.ca)