

Sugar Grove Nature Center Summer Registration Form

Please print. One student per form. You may copy this form as needed or print additional copies at www.sugargrovenaturecenter.org. Please register two weeks prior to first day of the program. Programs may be cancelled if minimum enrollment is not met.

Student's Name: _____ Age/DOB: _____
Last First

Parent/Guardian's Name: _____
Last First

Address: _____
Street City, State Zip Code

Day phone #: _____ Emergency Contact: _____
Name Phone #

EMAIL: _____

List people, other than myself, authorized to pick up my child:

Any allergies, medical conditions, or special dietary needs we should know about (if applicable):

Rules

1. Students are expected to give proper respect to staff, volunteers, other program participants, equipment, and the grounds at all times.
2. Students must be dressed appropriately for weather and circumstances of the class. No sandals, please.
3. Participants will arrive and be picked up on time.
4. All behavior problems will be reported to parents. Any behavior problems which are not remedied will result in the expulsion of the student from class and forfeiture of any monies paid for the current class.
5. Refund policy: A full refund will be issued if cancellation occurs two weeks prior to program. After that date, credit will be given towards another program, to be used within six months.

I have read and understand the rules of Sugar Grove Nature Center. I understand that students will be expected to abide by these rules, and if misconduct occurs, I will be informed. I will not hold Sugar Grove Nature Center or the Sugar Grove Foundation or their agents liable in case of accident or injury to my child. I understand that my child may be photographed for future publications or promotional pieces.

Signature: _____ Date: _____

Please enter information for your requested classes:

Class:	Date & Time:	Cost:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
		Total: _____

Please mail completed registration form with check (payable to Sugar Grove Nature Center) to:
Sugar Grove Nature Center, 4532 N 725 East Road, McLean, IL 61754.

You will receive confirmation upon receipt of your registration.

If you have any questions, call 309-874-2174 or email register@sugargrovenaturecenter.org.