NOTE: Sea and Sage Audubon Society, Inc. of Irvine, California, is a non-profit organization staffed largely by volunteers. Every reasonable effort will be made to ensure each individual’s safety while participating in this activity. However, there are inherent risks involved in participating in any outdoor activity. By signing below, you are acknowledging that Sea and Sage Audubon Society, its staff and/or volunteers, and the owners of any premises where the activities are conducted, even if they are negligent, will not be held responsible for any illness, accident or injury or property damage involving you or your child while participating in this Sea and Sage Audubon Society activity.

Please read this entire form carefully.

WE MUST HAVE THE COMPLETED AND SIGNED FORM IN ORDER FOR YOU OR YOUR CHILD TO PARTICIPATE.

If you have any questions, please contact Sea and Sage Audubon Education Project Director Trude Hurd at 949-261-7964. Thank you for your cooperation.

Program: NATURE WALK
Program Location: San Joaquin Wildlife Sanctuary, Irvine, CA
Program Date: (insert date) _______________________________________________________________________

“I, the undersigned, hereby release and hold harmless Sea and Sage Audubon Society, and all others acting on its behalf, as well as the owners of any premises on which the camp conducts activities, from any claim for damages of any kind, during or by reason of this activity, whether illness, personal injury, death, or damage to, or loss or theft of, property caused by, or resulting from participating in this activity, even if caused by negligence of Sea and Sage Audubon Society, its staff or volunteers, or anyone else acting on its behalf.”

For Participants 18 years old or over:
Signature of Participant: _______________________________________________________________________
Print Participant’s Name: _______________________________________________________________________
Date: ______________________________________________________________________________________

For Parent/Guardian of Participants under 18: “I have reviewed and understand the conditions of this program and give my consent for my child to participate.”

Signature Parent/Guardian: _______________________________________________________________________
Print Parent/Guardian’s Name: __________________________________________________________________
Print Child/Children’s Name(s): __________________________________________________________________
Date: ______________________________________________________________________________________