

Program Registration

Fax form to **425-460-9126**

Or fill out, sign, scan, and email to

<u>info@naturevision.org</u> www.naturevision.org

Use this form to register for up to 5 programs. For in-person programs, please coordinate dates and times with your teaching team to allow us to send one staff member to teach at least 2 programs at your school/site per day. For remote learning program Q&A sessions, please also plan for multiple classes per day when possible.

- Include all teacher first and last names, email addresses, and school contact information for in person and remote learning programs. This is needed for funders and our records.
- Please provide non-overlapping 45-60 minute time slots for each class receiving in person programs.
- For remote learning programs please provide 15 minute time slots for each class for a remote Q&A session with a Nature Vision Educator. You must choose a time for a Q&A session to register, but if your class cannot accommodate you may note that at the end of the form. You will still receive teacher materials and educator support from Nature Vision.
- If you would like to request a program be taught for your class in full over a video call, please check the Video Call Program box. These are 45-60 minutes in length.
- If you are registering for a pond dip, aquatic insect dip, or field trip you must have an accessible pond on site or be able to meet us at a field site nearby.

 Asterisks indicate a required field to register. Your form will not submit if all fields with asterisks are not completed.

 Please add info@naturevision.org to your safe senders list.

Check here if registering for an In-person Program or Field Trip, 45-60 minutes in length.

Check here if registering for a Pre-recorded Video and Remote Activity Bundle with a 15 minute Q&A session.
Check here if registering for a Pre-recorded Video and Remote Activity Bundle but your class cannot accommodate a 15 minute Q&A session. We will send materials and provide educator support only.
Check here if registering for a Video Call Program, 45-60 minutes in length. □

School Address*	City*_	Zip Code*		
Billing Address (Fill out	only if different than scl	hool address)		
School Phone Number*	(Phone line answered by o	office during school hours)		
Please see our online cale 3 possible dates in order of	-	org/available-dates for available dates. Choose		
Program 1 Name*	Tea	Teacher Name*		
Teacher Email*				
Dates Desired* 1)	2)3)	Time Desired*		
Grade Level*	# of Students* Room #/Field Site*			
Program 2 Name*	Tea	ncher Name*		
Teacher Email*				
Dates Desired* 1)	2) 3)	Time Desired*		
Grade Level*	# of Students*	Room #/Field Site*		
Program 3 Name*	Tea	Teacher Name*		
Teacher Email*				
Dates Desired* 1)	2) 3)	Time Desired*		
Grade Level*	# of Students*	Room #/Field Site*		
Program 4 Name*	Tea	acher Name*		
Teacher Email*				
Dates Desired* 1)	2) 3)	Time Desired*		
Grade Level*	# of Students*	Room #/Field Site*		
Program 5 Name*	Teacher Name*			

Teacher Email*						
Dates Desired* 1)	2)	3)	Time Desired*			
Grade Level*	# of Students*		Room #/Field Site*			
Additional Notes (more tha	n 30 student	s, high percent	ELL, etc.)			
	0 for science	fair or after sc	r one remote learning program, \$130 for hool program, \$190 for Water Cycle write FREE as total cost.			
Program Sponsor for Free	Programs	(if known)				
If you are registering for a service does your school us		rning progran	n or video call program, what video call			
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THE ABOVE NAMED SCHOOL RELEASES AND AGREES TO INDEMNIFY NATURE VISION, ITS OWNERS, EMPLOYEES, VOLUNTEERS AND DIRECTORS FOR ALL LOSSES, DAMAGES, JUDGMENTS, COSTS AND EXPENSES OF ANY KIND ARISING OUT OF OR IN ANY WAY RESULTING FROM THE ACTIVITIES OF STUDENTS, TEACHERS, VOLUNTEERS, PARENTS OR OTHER DISTRICT OR SCHOOL PARTICIPANT IN NATURE VISION PROGRAMS, INCLUDING SETTLEMENT PAYMENTS, COURT JUDGMENTS AND REASONABLE LEGAL DEFENSE FEES.						
Signature:						
			Date			