

Kingston Junior Naturalists

Registration Information 2024-2025

Please fill out the registration form and mail it and your payment by September 7, 2024.

- All past members will be accepted provided they register by September 7, 2024.
- New members (aged 6 to 12) may contact Sarah Wallace (sjwallace06@gmail.com or 613-328-1631) for a registration form or download one from the Kingston Junior Naturalists page on the KFN Website.
- Numbers are limited; if for any reason you do not wish to re-register please let Sarah know.
- If you were a junior and are now 13 to 17 years old, you should join the Teen Naturalists instead. Please contact Anne Robertson (n8ture.anne@sympatico.ca or 613-389-6742) or download the Teen Registration Form from the KFN Website.

Junior Meetings and Field Trips

Indoor meetings will be on the **fourth Thursday** of each month. More meeting details will be emailed to registered members as soon as they available. Family field trips will be offered on the **fourth Saturday** of each month. Details will be in the KFN newsletter, on the KFN website and emailed to registered members.

*** First Indoor Meeting: Thursday, September 26, 2024 ***

*** First Family Field Trip: Saturday, September 28, 2024 ***

Further information will be available at the first indoor meeting, in the KFN newsletter, or by contacting Sarah.

Please fill out, sign, and mail the registration form and a cheque for the \$20.00 registration fee made out to *Kingston Field Naturalists* to: Sarah Wallace, 140 Benjamin Court, Amherstview ON K7N 2A2. **Alternatively, you can drop off the registration form** in person and pay with a cheque **or cash**.

Keep this page for your reference.

Kingston Junior Naturalists

Registration Form 2024-2025

Except for the signature and date, this form's fields may be filled out on your screen then saved to your computer and/or printed directly from your browser.

Name of Junior:			STON JUNIOR MATURALIST
Address Line 1:			
Address Line 2:			
City/Prov/Post Code:			23
Parent 1's Name:		Parent 1's Phone:	
Parent 2's Name:		Parent 2's Phone:	
Date of Birth (Junior):			
Health Card (Optional):			
Email (Parents):			
	Cons	ent	
-	al guardian of and give my permission		
-	unior Naturalist activities. I will not) or for damage or loss of their posse		eld Naturalists responsible for injury this participation.
In the event of an emerger	ncy I authorize the administration of	any medical procedu	res deemed necessary by a physician.
Allergies, medications, or	other information that should be dis	scussed:	
Parent Signature:		Da	nte:

Please fill out, sign, and mail/drop off this form with the \$20.00 registration fee (please see the information sheet (page 1) for payment options) to: Sarah Wallace, 140 Benjamin Court, Amherstview ON K7N 2A2. Deadline: September 7, 2024.