



Program Registration Form
Northern Forest Explorers Winter Trip
Northeast Kingdom, Vermont

Student Name:

Age:

Sex: m f

Mailing Address:

School Attending:

Parent or Guardian Name (circle parent or guardian):

Address (if different):

Phone:

Email:

Program: February 4–5 2012: Winter Trip, East Charleston, VT
NorthWoods Stewardship Center

Trip Fee (includes meals, equipment, guides): \$50

Contact Roger Poor (below) for information about financial assistance!!

NOTE: Once signed up, we will send out additional course info

Check enclosed (made out to Northern Forest Canoe Trail)

Credit card: _____ Exp. _____

Circle: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Billing address if different than above:

The Northern Forest Canoe Trail uses images of its programs and participants in a variety of reports, publications and documents. These images represent NFCT as a whole and are essential in documenting and promoting our programs and accomplishments. I hereby grant the Northern Forest Canoe Trail permission to use, reproduce or distribute any photographs of my child(ren) taken during the program for use in materials it may create.

Parent/Guardian Signature: _____ Date: _____

For parents and guardians: By listing your children's name below you give the NFCT permission to use, reproduce or distribute any photographs or video taken during the program for use in materials we may create.

Child's name:

Thank you! Please return this form with your check or payment information to:

Roger Poor
Northern Forest Canoe Trail
PO Box 565
Waitsfield, VT 05673
(802) 496 – 2285 office
(603) 801 – 9597 mobile

Or return by email to:
Roger@NorthernForestCanoeTrail.org