



Sedge Island Natural Resource Education Center

Liability Waiver

Name: _____ Phone: _____
Date of Birth: _____ Sex: _____
Address: _____
Emergency Contact: _____ Phone: _____

Do you have any special needs that we will need to know about in advance to accommodate you during the workshop?

Is there anything about your health you would like us to know in case of an emergency?

Photo Release

I give NJ Division of Fish and Wildlife permission to use photographs of myself or child for promotional and/or educational purposes in printed materials, such as brochures, or on the NJ Division of Fish and Wildlife's website with the understanding that no personal information will be shared.

YES NO

Waiver

I understand that all possible precautions are taken to ensure that programs and activities at the Sedge Island Natural Resource Education Center are conducted by mature and qualified personnel in a safe and responsible manner. However, I further understand and agree that Sedge Island NREC and its staff cannot be held liable for any accident, illness, or disease that might occur. I also agree to follow all rules as stated on the Use Permit.

Signature: _____ Date: _____
Parent or guardian signature if under 18 years of age