

# Membership Application Form

Memberships may be obtained by mailing this completed form to:

Peterborough Field Naturalists  
 PO Box 1532  
 Peterborough Ontario K9J 7H7



**PETERBOROUGH FIELD NATURALISTS**

**Contact Information:**

<b>Name(s):</b>	<b>Phone(s):</b>
<b>Address:</b>	<b>Email(s):</b>

I would like to receive The Orchid by (pick one):  Mail Delivery  Email  Both

**Membership type and fee schedule:**

<p><b>Notice:</b> Membership fees provide only a small part of the funds required to operate the Peterborough Field Naturalists. Donations from members like you help us offer a diverse range of programming for everyone. Please consider including a donation with your membership so that we can continue to serve you and the Peterborough community. <b>Please make cheques payable to Peterborough Field Naturalists.</b></p>	<p>I have included a donation with my membership fees:  <input type="checkbox"/> <b>Yes</b> or <input type="checkbox"/> <b>No</b>                  If yes, amount: \$ _____</p>
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1. Single Adult \$30       2. Single Student or Youth \$15       3. Family \$40\*

**\* Please give the names and ages of children wishing to enroll in the Junior Field Naturalists:**

Name	Age	Name	Age

**←←← New Member Information →→→**

<b>Main interests:</b>	<b>How do you hope to participate?</b>
<input type="checkbox"/> Natural Environment <input type="checkbox"/> Reptiles and Amphibians <input type="checkbox"/> Botany <input type="checkbox"/> Birds <input type="checkbox"/> Aquatic Life <input type="checkbox"/> Geology <input type="checkbox"/> Insects <input type="checkbox"/> Astronomy <input type="checkbox"/> Mammals Other: _____	<input type="checkbox"/> Outings <input type="checkbox"/> Citizen Science <input type="checkbox"/> Meetings <input type="checkbox"/> Junior Naturalists

**Volunteers are always needed. Are you interested in any of these activities?**

Join the PFN Board       Sit on research or conservation committees       Lead an outing  
 Assist with meetings       Work on field projects       Help with the Orchid publication  
 Help the junior naturalists       Give a presentation

**Liability Waiver (New and Returning Members):**

In consideration of the Peterborough Field Naturalists (PFN) accepting this application, I hereby for myself, my heirs, executors, administrators and assigns forever release and discharge the PFN, their officers, directors, servants and agents from any liability whatsoever arising from my participation in PFN activities, whether by reason of negligence of the PFN or its representatives, or otherwise. I affirm that I am in good health, capable of performing the exercise required for field trips or other activities in which I participate and accept as my personal risk the hazards of such participation. As a member of the PFN and/or as a parent / guardian of a member under 18 years of age, I have read and understood the above, and accept its term on behalf of all my underage children.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_