



## HUYCK PRESERVE AND BIOLOGICAL RESEARCH STATION

Dear Caregiver,

Below you will find the Registration, Liability Waiver, and Photo Release forms for the Huyck Preserve's Field-Based Learning for Homeschool Students program.

Parents/Guardians please complete and sign where indicated the Registration, Liability Waiver and Photo Release forms.

If you have any questions, please do not hesitate to contact us by email ([education@huyckpreserve.org](mailto:education@huyckpreserve.org)) or phone (518-797-3440).

**Complete registration forms can be submitted by either:**

A. Email to: [education@huyckpreserve.org](mailto:education@huyckpreserve.org)

B. In person at: class on the first day

**Huyck Preserve Education Program  
Registration Form**

**Student Information** (Please include all students participating in the program):

Names \_\_\_\_\_

Ages \_\_\_\_\_

**Parent/Guardian Information:**

**Parent/Guardian 1**

Name \_\_\_\_\_

Email \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

**Parent/Guardian 2**

Name \_\_\_\_\_

Email \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

**Liability Waiver**

I hereby give permission for my student(s)'(s) participation in any and all activities associated with the Field-Based Learning for Homeschool Students program. I acknowledge that there are known-inherent and unforeseeable risks in these activities. The known-inherent risks of activities my student(s) and I will participate in are: dangers associated with interaction with nature, natural forces, strenuous outdoor activities, and the possible loss of personal property and injury due to personal actions. I do hereby waive, release, and absolve the Edmund Niles Huyck Preserve, Inc., its past, present, and future directors, officers, employees, and agents (whether acting as agents for the Huyck Preserve or in their individual capacities) from any and all claims arising out of injury or other harm to my student(s) and myself during our participation in education programs at the Huyck Preserve and further agree to indemnify and hold harmless the Edmund Niles Huyck Preserve, Inc., its past, present, and future directors, officers, employees, and agents from any claims, actions, expenses, or other damages arising out of that participation as well as arising out of any actions of my student(s) and/or myself.

**Photo Release**

I give permission to the Edmund Niles Huyck Preserve, Inc. to use my student(s)'(s) photo in publications, on its website, or other presentations to the general public.

Yes

No

**My signature acknowledges that the information provided above is correct and that I have read and agree with the above statements.**

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Parent/Guardian Signature

Date