Name: __________________________  Age: _______  Today’s Date:__________
Address: ________________________  City: ___________________________  Zip: ______
Phone: ___________________________  Email: ___________________________
Available Date(s)/ Times: ____________________________________________

Please Check All Areas of Interest:

**Special Events: (minimum age 15)**
- Wild Earth Fest - April
- Harvest Festival - September
- Rock, Mineral & Gem Show - November

**Relevant Skills For Special Events:**
- Face Painting
- Arts & Crafts
- Games & Activities
- Check In

**Naturalist Assistant For Children’s Workshops: (minimum age 15)**
- Small Fry Days- Drop off program for 4-6 year olds
  - Wednesdays - 10:00 - 11:15 AM
- Kids Explorations - Drop off program for 7- 10 year olds
  - Saturdays 10:00- 11:00 AM
- Summer Camp- Drop off program for pre-school - 6th graders
  - June - August; must volunteer for at least one full week of camp

**Special Projects Throughout The Year: (minimum age 15)**
- Exotic Plant Removal
- Gardening, Planting, Butterfly Garden, Backyard Wildlife Habitat
- Trail Maintenance
- Collection Inventory (rocks, minerals, artifacts, etc)

**Experience and Education:**
- High School  Grade: __________________________
- College  Major: __________________________
- Adult

List courses, classes, job experience, hobbies and skills that might be applicable:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

TRAILSIDE NATURE & SCIENCE CENTER
452 NEW PROVIDENCE ROAD
MOUNTAINSIDE, NJ 07092
(908) 789-3670
www.ucnj.org/trailside
Patrons of any Union County park and/or open space facility(ies) recognize the risks inherent in the use of said park and/or facility(ies). Other than acts on the part of the County which, if proven in an appropriate court of law, are tantamount to gross negligence, Patrons hereby agree to hold the County harmless from any and all damage resulting to person and/or property from the use of its park and/or open space facilities and hereby releases, waives and forever discharges the County, its servants, agents and/or employees from any and all such claims.

I acknowledge that I have read and agreed to the Release, Covenant Not to Sue and statement on this page.  

Yes               No.

**Photo Release:**  I also give Union County permission to photograph the volunteer listed below for publicity purposes.

Yes               No.

_______________________________________________

Signature of Volunteer

Date

_____________________________________________

Signature of Parent/Guardian (If volunteer is under the age of 18)

Date