

Colorado State University Extension
YOUTH NATIVE PLANT MASTER® APPLICATION
FOR AGES 16 and 17

Applications are due to the Extension two weeks prior to the session date. Email your application to Susan.carter@mesacounty.us FAX to 970-244-1700, or mail to: CSU Extension TRA PO Box 20,000 Dept. 5028 Grand Junction, CO 81502-5001. PLEASE DO NOT SEND PAYMENT WITH YOUR APPLICATION. If accepted, you will receive confirmation including a total for fees that will be due prior to the session. Questions? Visit www.nativeplantmaster.org or call 970-244-1834

Please PRINT to ensure you receive course acceptance materials.

Student Name: _____ Today's Date: _____

Student Current Age: _____ Student Birth Date and Year: _____

Parent/Guardian Name: _____ County of Residence: _____

Parent/Guardian Mailing Address:

Street

City

State

Zip

Parent/Guardian E-mail Address (required): _____ Student Email: _____

Parent/Guardian Cell Phone: _____ Student Cell Phone: _____

Parent/Guardian Work Phone: _____ FAX: _____

Please check the program for which you are applying:

Take Course or Class. Go to page 2 and complete Sections B and C.

Anyone may take *Native Plant Master Courses or Special Classes*, on a space available basis. There is no teaching requirement. All those successfully completing 3 NPM Courses will receive a Colorado Flora Certificate.

Native Plant Master Volunteer. Complete all sections below. Volunteer openings are limited and selection is based on demonstrated ability to educate others. If contacts are not made by November 15, registrants are billed for the fee difference.

To become a *Certified Native Plant Master*, you must:

1. Complete three Native Plant Master Courses in this or future years including passing certification exams.
2. Make a cumulative total of 30 educational contacts using information learned in NPM courses.
3. Report on number of educational contacts made and volunteer hours by November 15 each year.

SECTION A: (Native Plant Master Volunteer Applicants Only. All others go to Page 2.)

Natural Resource Agency You Work or Volunteer For: _____

Your Title: _____ Are you an employee or a volunteer? _____

May we contact your supervisor to verify your involvement with this agency? ____ Yes ____ No If yes, who may we contact?

Name

Phone

In your current job or volunteer role, how many people did you educate in public programs last year?

Would be interested in becoming a trainer to teach Native Plant Master courses in future years?

Yes ____ No ____ Not Sure ____

SEC. B: (All Applicants) - Check below courses for which you are applying.

2017 Course Dates	Location	Times	Requires Prior NPM Course	Fee*	Check Here To Apply	Dates You May Need to Miss
Native Plant Master Courses – Open to all: (Count towards NPM volunteer certification and Colorado Flora Certificate.)						
Colorado National Monument	East Entrance- details will be sent	Saturdays, April 22, 29 and May 6. (Bad weather makeup day May 20) 8am-noon	Basic Botany Recommended	Volunteer \$50 plus book Non-Vol \$75 plus book		
Black Canyon of the Gunnison	Carpooling is usually organized, South Visitor Center	Fridays, June 2, 9 and 16. (Bad weather makeup date June 23th) 10am-2pm	Basic Botany Recommended	Volunteer \$50 plus book Non-Vol \$75 plus book		
Grand Mesa	Carpooling, Skyway Ski Area	Fridays, July 7, 14, 21. (Bad Weather Makeup day July 28) 10am-2pm	Basic Botany Recommended	Volunteer \$50 plus book Non-Vol \$75 plus book		
Special Classes – Open to all: (These do not count toward NPM volunteer certification and Colorado Flora Certificate.) & Other.						
**Basic Botany	Sagebrush Room, Mesa County Fairgrounds, 2785 Hwy 50 Grand Junction, CO	April 20, 2017, 6-8 pm		Free if taking a session/ \$10		
**Basic Botany	<i>Delta County Courthouse Room 234</i>	May 23, 2017 6-8 pm		Free if taking a session/ \$10		
Book Rental	<i>Flora of Colorado, Ackerfield</i>	Rental per session area		\$15/ area		
Demonstration Day w/ Native Plant Tour	The Ute Learning Garden 2775 Hwy 50, behind the CSU Extension Mesa County office	June 3, 2017 9am – 2 pm		FREE Open to the Public		
Discover Wildflowers Black Ridge Hike	Colorado National Monument, Meet at the Visitor Center	June 11, 2017 8 am – 12:30 pm	Moderate Hiking, long distance-10 miles	Free except entrance into Park, Donations accepted		
Discover Wildflowers Grand Mesa Walk	Grand Mesa	July TBD		Free, Program Donations excepted		

*Accepted volunteers who educate others and report contacts receive a 33% discount. Do not pay fees now.

**Basic Botany is optional but recommended for those taking NPM credit courses for first time or those wishing a refresher class. Please reserve your space so we know how many to expect.

SECTION C: (Parent/Guardian must sign below.)

If my child is accepted for one or more Native Plant Master Courses, I agree to:

- Pay all fees prior to class. (Please do not send payment now.)
- Adhere to all Native Plant Master Program guidelines, including refund policies.
- Carefully read the waivers below, and if I agree, sign to indicate my agreement with these waivers:

I, the undersigned parent/guardian of the child listed below, exercising my own free choice to allow my child to participate voluntarily in Native Plant Master® courses, classes or volunteer activities (collectively the “Activities”), hereby acknowledge that I have been informed of the nature of the Activities and that I am aware of the hazards and risks which may be associated with my child’s participation in the Activities, including the risks of bodily injury, death or damage to property which may occur from known or unknown causes. I understand, accept, and assume all such hazards and risks, and waive all claims against the State of Colorado, The Board of Governors of the Colorado State University System, Colorado State University, Colorado State University Extension, Jefferson County, and their directors, officers, agents, employees and volunteers. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage that my child may sustain through his/her participation in normal or unusual acts associated with the Activities, regardless of whose fault may be the cause of my child’s injuries or damages, even if caused by carelessness or negligence, so long as the conduct which caused the injuries or damages was not grossly negligent, or willful and wanton.

Further, I hereby indemnify and hold harmless The Board of Governors of the Colorado State University System, Colorado State University, Colorado State University Extension, Jefferson County and their members, officers, agents, employees, and any other persons or entities acting on their behalf, and the successors and assigns for any and all of the aforementioned persons and entities, against any and all claims, demands, and causes of action whatsoever, whether presently known or unknown, of any person who suffers any injury, disability, death or other harm, to person or property or both, as a result of my child’s participation in and/or presence at Activities.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily give my consent and agree to this Release Form Responsibility, Assumption of Risk, and Waiver.

Further, I grant permission to Colorado State University Extension, its employees or representatives, to take and use photographs/digital images, videotape, audio recording or quoted remarks, educational or other PowerPoint or presentation materials of my child or prepared by my child for use in promotional or educational materials. These materials might include printed or electronic publications, Web sites or other electronic communications. I further agree that my child’s name and identity may be revealed in descriptive text or commentary in connection with the image(s).

I further agree that the media may contact me to speak with me regarding my child’s involvement in CSU Extension activities. I authorize the use of these materials indefinitely without compensation to me. All negatives, positives, prints, digital reproductions and video and audio recordings shall be the property of Colorado State University Extension.

(Student Name – Please Print)

(Parent Guardian Signature)

(Date)

In order to help us best serve our participants and also help maintain federal funding for our program, please choose the category below that best describes your child. Responses are strictly confidential.

- | | | | |
|-----------------------|--|---------------------------------|--|
| Gender | <input type="checkbox"/> Male | <input type="checkbox"/> Female | |
| Race/Ethnicity | <input type="checkbox"/> White, Non-Hispanic | <input type="checkbox"/> Black | <input type="checkbox"/> Hispanic Origin |
| | <input type="checkbox"/> American Indian | <input type="checkbox"/> Asian | <input type="checkbox"/> Multi-Race |