

Michigan Botanical Society Foray 2023

Registration and Field Trip Sign-up

This form is only to be used by those folks who **do not** have internet access.

To register online, go to <https://tinyurl.com/MBS-foray>

Do not register both online and with this form.

Mail this form with a check to: Don Drife, 1813 Beech Lane, Troy MI 48083-1737

Note that the second page is a waiver that needs to be signed.

Name _____

Address _____

City _____ State _____ Zip+4 _____

Phone _____ Cell _____ E-Mail _____

Mbc Chapter Membership: Check One

HVC ___ SEC ___ SWC ___ WPC ___ GLC ___

Registration and Meals

Registration Fee: \$35.00 _____

Meals

Friday dinner (pizza, salad, beverages) \$21.00 _____

Full dinners (2) Saturday and Sunday \$64.00 _____

Box lunches (2) Saturday and Sunday \$26.00 _____

Monday box lunch \$13.00 _____

TOTAL _____

Michigan Botanical Society Field Trips

Pre-selecting your field trip preferences is part of the Foray registration. For each day of participation, please indicate your 1st, 2nd, and 3rd choices. Field trip assignments are first come, first assigned, with priority given to MBC members in good standing. Some field trips have size limits due to their location, ownership, or leader requirements. Field trips at State Parks will require an entrance fee or a license plate state park pass. Carpooling for each driving trip will be organized in the parking lot prior to departure. Your field trip schedule will be waiting for you when you check in.

Full/Half Day	Destination	Day and Time	First, second or third choice (write 1, 2 or 3)
SATURDAY			
Full Day	Clark & Pine	Saturday	
	Dunes, Pannes, Marquette Park	Saturday	
	Shirley Heinze Land Trust Properties	Saturday	
Half Day	Amphibians Ecology @ Cowles Bog Trail	Saturday AM	
	Nature Journaling & Sketching	Saturday AM	
SUNDAY			
Full Day	Pinhook Bog	Sunday	
	Clark & Pine	Sunday	
	Cowles Bog Trail	Sunday	
Half Day	Tolleston Dunes Marsh Overlook	Sunday AM	
	Coastal Geology @ Mount Baldy Beach Trail	Sunday AM	

Waiver and General Release of Liability

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES being conducted by the Michigan Botanical Society at the 2013 Fall Foray, September 1 - 4, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I CERTIFY that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I CERTIFY that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity. In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(1) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: The Michigan Botanical Society and/or its directors, officers, volunteers, representatives, and the activity holders, sponsors, and volunteers;

(2) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that the Michigan Botanical Society and its directors, officers, volunteers, representatives, and agents are NOT responsible for errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people, including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Signature:

Date: