

T E X A S



BRAZOS VALLEY CHAPTER

BRAZOS VALLEY CHAPTER TEXAS MASTER NATURALIST™ PROGRAM

The Texas Master Naturalist Program’s mission is to develop a corps of well-informed volunteers to provide education, outreach, and service dedicated to the beneficial management of natural resources and natural areas within their communities for the State of Texas.

This program is a collaborative effort of Texas A&M AgriLife Extension Service and Texas Parks and Wildlife Department.

Application for the 2026 New Member Training

Educational programs of the Texas AgriLife Extension Service (Brazos County) are open to all persons regardless of race, ethnicity, sex, gender identity, sexual orientation, disabilities, religion, or national origin.

Enrollment in the TMN New Member Training is limited to persons 18 years of age or older.

Tuesday evenings 6:00 – 9:00 p.m., August 18 through November 10, 2026

Classes will be held at the [Biodiversity Research & Teaching Collections](#).

Five Saturday morning field trips (08/29, 09/26, 10/10, 10/24, 11/07)

Tuition Fee for the training is **\$165** per person or **\$295** for two persons sharing a textbook.

The Deadline for submitting application and fee is **August 07, 2026**.

Class size is limited. To ensure space, submit early.

Your Legal Name on Certificate: _____

Your Prefer Name on Name Tag: _____

Mailing Address: _____

County: _____

Birthday: _____

Phone number: _____

Email Address: _____

Confirmation and notices will be by email, please print clearly, if filled out by hand.

Complete and sign this application form either electronically or the old-fashioned way. Complete **BOTH PAGES** of this form.

- **Complete form electronically and pay online:** Make sure you use Adobe to complete and sign this form then email the completed form to membership@txmnbv.org. Scan QR code or click URL to pay online at our store.
- **The Old-Fashioned Way:** Print the form, fill it out, and mail with a check payable to **TMN Brazos Valley Chapter** to:



**TMN Brazos Valley Chapter, Attn: Betty Vermeire,
PO Box 9126, College Station, TX 77842-9126**

Scan QR code or go to
<https://txmn.org/brazos/welcome>

Occupation/Employer: _____

If not employed what was your former occupation? _____

Student (Undergrad or Graduate)/Advisor Name: _____

Receiving academic/course credits for taking this training: Yes No

Initial EACH item:

_____ I have reviewed the Training Schedule provided and am available to attend all classes and field studies. At least 40 hours of training are required; you may miss two classes/field studies. If more are missed, they must be made up in the next training cycle in order to complete the classroom requirement.

_____ I understand I will be required to complete at least 40 hours of Volunteer Service and eight hours of Advanced Training within 12 months of the start of classes to become a Certified Texas Master Naturalist.

_____ I understand that to maintain Certified Status as an active member of the Texas Master Naturalist Program, I must complete at least 40 hours of Volunteer Service and eight hours of Advanced Training each year and pay annual chapter dues.

_____ I understand that a mandatory criminal background check will be run by the TMN.

How did you hear about the Texas Master Naturalist Program? _____

Briefly describe why you are interested in the Texas Master Naturalist volunteer program.

Indicate any organizations of which you are a member or have volunteered time during the last two years. Indicate the average number of hours you have volunteered for each organization monthly.

Liability Release:

In consideration of being accepted as a participant in the Texas Master Naturalist Volunteer Program, I hereby release, discharge, and agree to hold harmless the Program and its sponsoring state agencies, their agents, employees, officers and successors, from all personal injuries (including death), known and unknown, or damage to property caused by or arising out of activities performed under the Texas Master Naturalist Program.

Print Your Name: _____ accepts the Liability Release listed above.

Signature _____ Date _____

Email the completed and signed form to membership@txmnbv.org.