

Master Naturalist™



**BRAZOS VALLEY CHAPTER
TEXAS MASTER NATURALIST™ PROGRAM**

This program is a collaborative effort of the Texas AgriLife Extension Service- Brazos County, Texas Parks and Wildlife, Biodiversity Research and Teaching Collection, and the Brazos Valley Museum of Natural History.

Educational programs of the Texas AgriLife Extension Service- Brazos County are open to all people without regard to race, color, sex, disability, religion, age or national origin. Enrollment in the TMN training class and membership in the organization are limited to persons 18 years of age or older.

Application to attend the 2017 Basic Training Session:
Tuesday evenings 6:00 – 9:00 p.m., September 5 through November 14, 2017
at the Brazos Valley Museum of Natural History, Bryan, TX
Five Saturday field trips (9/23, 9/30, 10/14, 10/21, 11/4)
Tuition Fee for the training session is **\$150**
DEADLINE to submit application and fee is **August 31, 2017.**
Class size is limited. To assure space, submit early.

Name: _____
(As you wish it to appear on your certificate, please print clearly)

Name: _____
(As you wish it to appear on your name tag, please print clearly)

BVTMN Polo Shirt (circle) Size: S M L XL XXL
Style: Women's Men's

Mailing Address:
Street _____
City _____ County _____ Zip Code _____
Telephone: Home () _____ Cell Phone () _____
Email Address: _____

Confirmation and notices will be by email, please print clearly.

Occupation/Employer: _____

If not employed what was your former occupation? _____

Student (Undergrad or Graduate)/Advisor Name: _____

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

Complete **BOTH PAGES** of this form and mail to address below with \$150 tuition fee (\$265 for a couple willing to share curriculum textbook). Make checks payable to **TMN Brazos Valley Chapter.**

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

Initial EACH item:

_____ I have reviewed the Training Schedule provided and am available to attend all classes and field studies.

_____ I understand I will be required to complete at least 40 hours of Volunteer Service and eight hours of Advanced Training within 15 months of the start of classes to become a Certified Texas Master Naturalist and a member of the Brazos Valley Chapter.

_____ 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.

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

How did you hear about Texas Master Naturalists? _____

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 on a monthly basis.

Please indicate skills, professional training, or interests which you would care to share as a Texas Master Naturalist. (Check all that apply).

- _____ Educational and/or Public Information, such as Speaking, Nature Guide, Children's Activities, Project Development
- _____ Field Activities and/or Monitoring/Surveys, such as Plant/Wildlife Census, Habitat Restoration/Planting, Water Quality Testing, Bird/Butterfly Counts, Seed/Plant Collection
- _____ Administrative Assistance, such as serving on Committees (Membership, Volunteer Service, Advanced Training), Newsletter, Database/Computer Assistance, Fundraising Activities
- _____ Other (be specific) _____

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.

By signing below, _____ (print your name) accepts the Liability Release listed above.

Signature _____ Date _____