



Dear Parent/Guardian,

Your son/daughter has chosen to participate in WildLink, a program of NatureBridge. WildLink's goal is to **give youth a series of wilderness and home-based experiences that will foster their connection to wild places and empower them as community leaders.** Students recruited for participation in WildLink are considered youth with potential to be future leaders among their peers and their larger communities.

Please be aware there are certain expectations of students who are selected to participate in WildLink. Your son/daughter is committing to the program for a full year, sometimes beyond a year depending on the dates selected for various programs. During this year, each WildLink participant will have a variety of opportunities to participate in the program, including but not limited to:

- A six-day Wilderness trip to Yosemite National Park, including a backpacking expedition.
- WildLink Family Weekend
- A variety of presentations and stewardship projects with WildLink partners through the Wilderness Ambassador Program
- WildLink Career Connection
- Activities conducted by the National Park Service (NatureBridge does not participate in the management or supervision of these activities)

Transportation to WildLink program activities must be provided by you, your child's school/group or carpooling with other participants. NatureBridge does not provide such transportation.

The registration forms which you submit on behalf of your child will be used throughout the year and will apply to the WildLink activities described above and programs or activities which may be added later. Included among the forms is our "Registration, Health Screen and Participant Agreement". The Participant Agreement includes, among other important provisions, agreements which require you and your child to assume the risks of NatureBridge activities and release NatureBridge from any claims of personal injury or other loss arising from programs and activities offered by it, including those described above. Please read the Participant Agreement carefully. Your signature at the end of this letter is your acknowledgement that the terms of that agreement apply to your child's participation in the WildLink program.

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Print Parent/Guardian Name

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Parent/Guardian Signature

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Student Participant Name

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Date



## WildLink Student Contract

Our commitment is to provide new experiences, fun learning opportunities, and safe adventures. In order to attend a WildLink program, you must make a commitment of your own to live by the following guidelines. Please put your initials next to each item and sign at the bottom.

### AGREEMENTS

- I understand that a violation of any of the following agreements may result in a return trip home at my parent/guardian's expense.
- I agree to participate fully to the best of my ability in the WildLink program. I understand that my experience and the experience of other students will depend on my active participation.
- I agree to treat my peers, adults, and all NatureBridge and National Park Service staff with respect. I understand how I speak and interact with others is important. I agree to not to cause physical or emotional harm or threaten any other person. I agree not to discriminate against others because of their race, culture, religion, language, talents, or special needs. I understand that I will be a member of a remote, mobile community in the backcountry, and that my ability to be good community member will make a difference in the outcomes of the trip.
- I agree to respect the privacy, property, and feelings of others. I understand that I will be living together with other students in cabins and tents, and may share facilities with other groups or visitors from the general public.
- I agree to follow all rules regarding sleeping arrangements, including staying out of other students' tents and cabins, and agreeing to be quiet and respectful in the evenings so that everyone can get enough sleep to participate and stay healthy.
- I agree to follow directions and rules given to me by staff. I understand that failing to follow directions in the rugged backcountry environment can jeopardize my personal safety.
- I agree to respect all facilities and the resources of the national park. I will refrain from any acts of vandalism and follow all wilderness regulations, as dictated to me by WildLink staff. I understand that failing to follow these regulations can harm the environment and jeopardize the WildLink program.
- I agree to refrain from bringing or using non-prescription drugs, cigarettes, weapons, and alcohol to the WildLink program.
- I agree to follow my equipment list and bring the things I will need to be comfortable and safe in the backcountry. I also agree to listen to the guidelines given by my educator about what to bring and what to leave behind on the backpacking trip. I understand that not following those guidelines could harm wildlife or my own personal safety.
- I agree to always let an adult know where I am and never wander off alone.

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*Signature*

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*Date*





If you have answered "yes" to any of the above items, please explain below. Provide corresponding number. (Attach additional pages if necessary.)

Question No.	Explanation

- Does the Participant have any **food allergies**?  Yes  No If YES, please specify \_\_\_\_\_
- Does the Participant have any **food restrictions**?  Yes  No If YES, please specify \_\_\_\_\_
- Is the Participant **taking any medication**?  Yes  No Please **list all medications** the Participant is taking\*\* **and the purpose of each.** \_\_\_\_\_

\*\*Participant must **continue to take all medications** during the Program unless otherwise instructed by your physician.

- Is the Participant **capable of participating** in a 5 mile hike with up to 2,000 feet of elevation gain?  Yes  No
- Are there any **restrictions on the Participant's physical activity**?  Yes  No Please describe: \_\_\_\_\_
- Please provide **any additional information** that you believe we should know to help us provide a quality experience for the Participant. \_\_\_\_\_

Name of Physician \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Medical Insurance carrier \_\_\_\_\_  
Policy #/I.D.# \_\_\_\_\_ Subscriber Name \_\_\_\_\_  
Additional information attached:  Yes  No

**PARTICIPANT AGREEMENT  
(INCLUDING ASSUMPTION OF RISKS, RELEASE AND INDEMNIFICATION)  
REQUIRED FOR ALL PARTICIPANTS**

PLEASE READ THIS ENTIRE AGREEMENT CAREFULLY. IT AFFECTS THE LEGAL RIGHTS OF PARTICIPANTS AND THEIR FAMILIES IN THE EVENT OF AN INJURY OR OTHER LOSS.

All Participants age 18 and older, including all teachers and chaperones, (referred to as "Adult Participants"), must sign this Participant Agreement. At least one parent or legal guardian (both referred to as "Parent") must sign on behalf of themselves individually as well as on behalf of their minor child or ward (referred to as "Minor Participant"). The term "I" as used in this Participant Agreement refers to the Adult Participant and/or Parent. The term "Program" refers to the NatureBridge program in which a Participant has enrolled.

In consideration of the Program, services, benefits and amenities provided by NatureBridge, a California Non-Profit Public Benefit Corporation, I hereby understand, acknowledge and agree as follows:

**Activities and Risks**

Activities vary from program to program, and may include hiking, stewardship activities (for example, plant removal and trail maintenance), backpacking, skiing, snowshoeing, snorkeling, kayaking, canoeing, and other water craft excursions. Some programs involve travel in NatureBridge vehicles driven by NatureBridge employees. I understand that this Program exposes its Participants to a variety of risks and hazards, foreseen and unforeseen,

some of which are inherent and cannot be eliminated without fundamentally altering the unique character of the Program. These inherent risks include, but are not limited to, environmental risks and hazards, including rapidly moving, deep, or cold water; plants, insect stings and bites, snakes, and predators, including large animals; falling and rolling rock; lightning; and unpredictable forces of nature, including weather that may change to extreme conditions without notice. Possible injuries and illnesses include allergic reactions, including, importantly, anaphylaxis, hypothermia, frostbite, high altitude illnesses, sunburn, heatstroke, dehydration, infectious diseases such as norovirus, plague or hantavirus, musculoskeletal injuries, and other mild or serious conditions or injuries, including death. Emergency evacuation and medical care may be delayed twenty-four (24) hours or more due to the remote locations of some Program activities.

### **Assumption of the Risks**

I understand that the description above of the risks involved in NatureBridge activities is not complete, and that other risks may result in property loss, personal injury, or death. For myself and for my Minor Participant, I agree to assume, to the fullest extent permitted by law, the risks of participation, known and unknown, inherent or not, and whether or not such risks are described above. I understand that participation in this Program is entirely voluntary and I consent to participation with full knowledge of the risky nature of the Program. If the Participant is a minor child, I have discussed the activities and risks with her or him and the child wishes to participate nevertheless.

### **Release and Indemnification**

I, an adult Participant or Parent of a Minor Participant, for myself and on behalf of that Minor Participant, agree to release, indemnify, protect, and hold harmless, and promise not to sue, NatureBridge and/or its affiliated institutes, and/or any of their respective officers, directors, employees, contractors, and insurers (the "Released Parties"), with respect to any and all claims, demands, damages, losses, or liabilities, including, but not limited to, claims for personal injury or death, which I or my Minor Participant may suffer, arising out of or in any way related to my, or my Minor Participant's, participation in the Program. The claims hereby released and indemnified against include those caused by or arising from the negligence of a Released Party, or any of them, but not those caused by or arising from any reckless or intentionally wrongful act or omission. If a Released Party is required to defend any claim brought by and/or on behalf of me, a family member, and/or my Minor Participant, I or my, and/or the Minor Participant's, heirs or executors agree to pay such Released Party's costs of litigation and attorney's fees if and to the extent the Released Party successfully defends against such claim.

### **Medical**

I represent that the medical information I have provided above is correct and complete to the best of my knowledge.

I authorize NatureBridge staff who have received appropriate training to administer basic first aid and "over the counter" medication, including aspirin, Tylenol, ibuprofen, Benadryl, Neosporin, Pepto-Bismol, and similar medications. I understand that NatureBridge staff does not carry epinephrine for the treatment of life threatening allergic reactions which might occur during the Program. If my Minor Participant has a known life-threatening allergy, or if I have been advised that he or she should be prepared for a possible serious allergic reaction, my Minor Participant has been provided with auto-injectable epinephrine and a physician's instructions for its use, and I have instructed my Minor Participant to have these available at all times during the Program. If my Minor Participant is enrolling in the Program as part of a school or other group, I have also informed the person in charge of the school or other group of this allergy and any applicable physician-prescribed protective measures.

I authorize any adult chaperone or member of the NatureBridge staff to obtain medical care for my Minor Participant (or me, if I am unable to consent), and to consent to any X-ray, examination, anesthetic, diagnosis, treatment and/or hospital care that may be recommended by a licensed physician and/or dentist. In the event of minor illnesses or injuries, I understand that NatureBridge will attempt to contact me at the earliest practicable

opportunity. In the event of major illnesses or injuries, I understand that NatureBridge will attempt to contact me before the commencement of any medical treatment, unless my Minor Participant's condition is such that treatment must be commenced immediately before contact with me can be made. Even if I cannot be reached, this authorization remains in full force and effect.

I agree to assume full financial responsibility for the costs of any evacuation and/or any medical care/treatment that I or my Minor Participant may receive.

**Other Provisions**

I agree that NatureBridge and its designees may use, without restriction or compensation, my likeness, or that of my Minor Participant, whether in photographs or video, as well as any writing, artwork and/or testimonials created by me or my Minor Participant and submitted to NatureBridge. I agree that once submitted, these materials shall become the property of NatureBridge.

I understand that during part of the Program, my Minor Participant will be under the supervision of teachers, chaperones, and other adults who are not NatureBridge employees, and who have not been selected, and are not supervised, by NatureBridge. I understand and agree that NatureBridge is not responsible for the actions of any such individuals.

NatureBridge uses independent contractors for some services, and such independent contractors, and not NatureBridge, are solely responsible for any losses or injuries caused by their acts or omissions.

I understand that this Participant Agreement is intended by NatureBridge to have as broad an effect as the law permits, and that if any part of this Participant Agreement is found to be invalid for any reason, the remainder of the Participant Agreement shall remain valid and fully enforceable.

I agree that if there is a dispute between me or my Minor Participant, on the one hand, and a Released Party, on the other, such dispute will be governed by the substantive laws of the State of California, and that any lawsuit against any of the Released Parties will be filed and maintained in a court of competent jurisdiction in San Francisco County, California.

I have carefully read this Participant Agreement, I understand its terms, and am signing it voluntarily. I have had any questions concerning the Program answered to my satisfaction.

I have been advised to consult with an attorney of my choosing if I have any questions regarding the translation of this Participant Agreement. I understand that in the event of any issue regarding the translation, the English version of this Participant Agreement shall control.

**Name of Participant** \_\_\_\_\_

**Print Name**

\_\_\_\_\_  
**Parent or Guardian Signature**  
(For Minor Participant)

\_\_\_\_\_  
**Print Name**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
**Date**

\_\_\_\_\_  
**Adult Participant Signature (if age 18 or older)**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
**Date**

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## Volunteer Services Agreement for Natural Resources Agencies

*for Individuals or Groups*

*Please print when completing this form*

GROUP/SCHOOL LEAD

Site Name <b>YOSEMITE NATIONAL PARK</b>	Agency <b>NATIONAL PARK SERVICE, DOI</b>	Reimbursement (if any) <b>NONE</b>	
Name of <sup>SCHOOL</sup> Group Leader – Last, First, Middle	Home Phone <sup>OF GROUP LEAD</sup>	Cell Phone <sup>OF GROUP LEAD</sup>	Email Address <sup>OF GROUP LEAD</sup>
Street Address <sup>OF SCHOOL/ORGANIZATION</sup>	City	State	Zip Code

STUDENT INFO

IF VOLUNTEER IS UNDER AGE 18 – Name of Parent or Guardian	Home Phone	Cell Phone	Email Address
Street Address	City	State	Zip Code

I affirm that I am the parent/guardian of the above named volunteer. I understand that the agency volunteer program does not provide compensation, except as otherwise provided by law; and that the service will not confer on the volunteer the status of a Federal employee. I have read the attached description of the work that the volunteer will perform.

I give my permission for STUDENT NAME to participate in the specified volunteer activity sponsored by NatureBridge at YOSEMITE NATIONAL PARK  
(Name of Sponsoring Organization, if applicable) (Name of Volunteer Duty Station)

From \_\_\_\_\_ to \_\_\_\_\_  
(Date) (Date) (Parent/Guardian Signature) (Date)

**SIGN!**

Emergency Contact Name	Home Phone	Cell Phone	Email Address
Street Address	City	State	Zip Code

### GOVERNMENT OFFICIAL COMPLETES THIS SECTION

X

Brief description of work to be performed. *Include details such as minimum time commitment required, use of personal equipment, use of government vehicle, etc. Attach the complete job description to this form. If this is a group agreement, the leader is to provide the group name, a complete list of group participants to be attached to this form, and parental approval (above) completed for each volunteer under the age of 18.*

Volunteers will take part in a variety of projects, which may include litter removal, invasive species removal, asphalt removal, conifer removal, water quality monitoring, Sequoia monitoring, seedling surveys, animal recording, bear box monitoring and cleaning, snow shoveling, Great Gray owl survey, acorn collecting, and related resource preservation and restoration work. The work usually last for about an hour and can involve digging with shovels, using cleaning materials and scientific equipment. Volunteers will be provided appropriate safety training and instruction of correct usage of tools.

Government Vehicle required?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Valid State Driver's License	<input type="checkbox"/> International Driver's License
Personal Vehicle to be used?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Please verify that the volunteer is in possession of one of these documents. DO NOT keep a copy of the document for his/her file.	

I understand that I will not receive any compensation for the above work and that volunteers are NOT considered Federal employees for any purpose other than tort claims and injury compensation. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the government or I may cancel this agreement at any time by notifying the other party.

I understand that my volunteer position may require a background investigation in order for me to perform my duties.

I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.

I do hereby volunteer my services as described above, to assist in agency-authorized work.

SIGN →

\_\_\_\_\_  
(Signature of Volunteer or Group Leader)

\_\_\_\_\_  
(Date)

The above-named agency agrees, while this arrangement is in effect, to provide such materials, equipment, and facilities that are available and needed to perform the work described above, and to consider you as a Federal employee only for the purposes of tort claims and injury compensation.

X

\_\_\_\_\_  
(Signature of Volunteer Manager/Coordinator)

\_\_\_\_\_  
(Date)

**Termination of Agreement**

X

Volunteer requests formal evaluation  Yes  No Evaluation Completed \_\_\_\_\_  
(Date)

Agreement terminated on \_\_\_\_\_  
(Date) (Signature of Volunteer Manager/Coordinator)

**Public Burden Statement**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0080. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The Department of Agriculture (USDA) and U.S. Department of the Interior (USDI) prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA and USDI are equal opportunity providers and employers.

**Privacy Act Statement**

Collection and use is covered by Privacy Act System of Records OPM/GOVT-1 and USDA/OP-1, and is consistent with the provisions of 5 USC 552a (Privacy Act of 1974), which authorizes acceptance of the information requested on this form. The data will be used to maintain official records of volunteers of the USDA and USDI for the purposes of tort claims and injury compensation. Furnishing this data is voluntary, however if this form is incomplete, enrollment in the program cannot proceed.



## Expedition Equipment List

### Students **MUST** bring these:

- Personal medications. Minors will hand over all prescription drugs and over-the-counter medicines to an adult chaperone for administration.
- Ankle and knee braces (if you use them for sports)
- 1 pair of hiking pants – “warm up style” nylon pants are good because they dry quickly. Absolutely NO blue jeans or cotton sweatpants.
- 2 t-shirts (cotton or synthetic)
- Hiking boots or athletic shoes with good tread. No Vans, Converse, etc. with smooth, slick soles.
- 1 pair of warm pants – to wear in camp in the evenings. Sweatpants, fleece or pajama pants work well. NO jeans.
- Sunglasses
- Sun hat/baseball cap
- Chapstick
- Toothbrush, travel-sized toothpaste
- School backpack – for first day of hiking
- Feminine hygiene items, as necessary, in a Ziploc bag

**\*\*What’s the big deal about cotton?\*** In cold and wet backpacking conditions, it is a poor insulator, it does not dry easily, and pulls heat away from your body, leaving *you* cold and wet. Wool and synthetics keep you warm, even when wet.

### Optional gear:

- 1 pair of shorts – nice in the warm seasons.
- Camera. You may not take your cell phone on the backpacking part of the week, so you may choose to bring a digital or disposable camera or use one of the WildLink cameras. The WildLink camera photos will be put up on Flickr for all students at the end of the trip.
- 1 pair of extra shoes/sandals for stream crossings (usually not necessary, but sometimes nice in spring)
- Other items for the first couple of nights of camping/cabins – pillow, sweatshirt, jacket, jeans, shampoo, soap, towel, deodorant, phone. These items will NOT go on the backpacking part of the trip, but they will be nice to have for the first part of the trip and to change into at the end.

### Absolutely NO:

- Drugs or alcohol. This is a FEDERAL OFFENSE in national parks and we are required to inform federal law enforcement of all instances of possession.
- Knives, including pocket knives. WildLink staff will carry them, but students may not.

### WildLink will provide the following gear. If you have your own, you can bring it, but you do not need to go buy these items!

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>○ Rain jacket with hood, rain pants</li> <li>○ 2 fleece or wool sweaters</li> <li>○ Long-sleeve shirt (NO cotton)</li> <li>○ Long-underwear bottoms/tights</li> <li>○ Gloves/mittens, warm hat/beanie</li> <li>○ Wool or synthetic hiking socks</li> <li>○ Small plastic bowl, small plastic mug, one spoon</li> <li>○ Sunscreen</li> </ul> | <ul style="list-style-type: none"> <li>○ Bandanna – to be a “place mat” for lunch</li> <li>○ Headlamp/flashlight and batteries</li> <li>○ 2 one-liter water bottles</li> <li>○ Sleeping bag and stuff sack</li> <li>○ Sleeping pad</li> <li>○ Backpack (large, for camping)</li> <li>○ Bug spray</li> <li>○ Journals and colored pencils</li> </ul> |
|--|---|