

REGISTRATION
NPSO Annual Meeting, June 6-8, 2014, Cannon Beach, Oregon
<http://www.npsoregon.org/annualmeeting.html>

COMPLETE A SEPARATE FORM FOR EACH REGISTRANT

Additional copies available on the meeting website (above).

NO REFUNDS AFTER MAY 1. REGISTER BY JUNE 1 TO ATTEND THE BANQUET.

Registration confirmations will be emailed. *You must be an NPSO member to attend the Annual Meeting. To become a member, please include a membership fee (below) with your registration.*

Name: _____ **Chapter:** _____

Address: _____

Phone: _____ **Email:** _____

Accommodations: You are responsible for your own lodging. See the link to lodging options on the annual meeting website (above). It is advisable to reserve your lodging as soon as possible.

Registration: By May 1 **\$30**; after May 1 **\$45**. \$ _____

Registration covers facility costs, scholarships, Friday social, and Sunday board meeting.

Meals - please check your preference:

Saturday box lunch \$16: sandwich, fruit, cookie \$ _____

___ Beef (B), ___ Turkey (T), or ___ Cheese (C) sandwich

Saturday banquet buffet \$32 \$ _____

___ Chicken parmesan (C) or ___ Vegetarian cheese ravioli (V), Caesar salad, garlic bread, dessert;

___ Gluten free (GF): grilled chicken breast, roasted potatoes, salad, dessert

NPSO Membership (new members only): \$25 individual, \$35 family, \$12 student \$ _____

Total Enclosed: \$ _____

Field trip preferences: Field trips are described in the February *Bulletin* and on the meeting website (above). Indicate Saturday field trip preferences by name and number as described in the *Bulletin*. If you are choosing two half-day trips, indicate the names and numbers of both as a single choice.

1st choice: _____

2nd choice: _____

3rd choice: _____

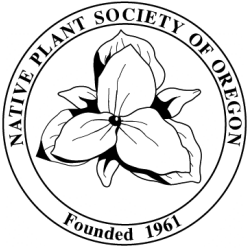
Check below if you will participate in:

___ Friday afternoon, June 6 field trip to Ecola Creek Forest Reserve, noon-3:00 pm

___ Sunday morning, June 8 field trip to Cape Falcon in Oswald West State Park, 9:00 am-noon

___ Sunday morning, June 8 NPSO State Board meeting, 8:30-noon

Make your check payable to **NPSO Cheahmill Chapter**. Send registration form, waiver, and full payment to: **NPSO c/o Lisa Blackburn, 1808 N. Emery Dr., Newberg OR 97132**; email: npsoannmtg2014@gmail.com. **Sign and include the waiver (over) with your registration. Make a copy of both sides for your records.**



Native Plant Society of Oregon Waiver of Liability and Indemnification Agreement

***** **PLEASE READ ALL OF THIS FORM. IT IS IMPORTANT!** *****

Thank you very much for coming on an NPSO field trip! The following agreement is necessary for the well-being of NPSO and all field trip participants. We appreciate your understanding.

1. **I understand that I am solely responsible for my own safety at all times.** I acknowledge that **my participation** in any Native Plant Society of Oregon (NPSO) field trip is **purely voluntary**, and I understand that **some parts of the field trips may be hazardous** and my result in the damage or loss of my property or in my injury.
2. **I agree to take full responsibility for my own medical needs.** I am aware that trips require physical outdoor activity and have certain risks inherent with exposure to nature and natural processes. I certify that I have no health or physical problems which would interfere with my participation.
3. **I understand that horseplay, roughhousing, shoving, contact sports, or other such activities are not appropriate and not allowed on NPSO trips.**
4. **I agree to stay with the group.** If I need to vary for any reason, I will do so only with the permission of the leader.
5. **I understand that transportation to the beginning of the trailhead or field site is not part of any NPSO-sponsored activity.** Although NPSO suggests carpooling to save gas and reduce pollution, I agree that if I carpool, it is an independent activity organized by myself and other individuals on our own initiative and at our own risk.
6. **I hereby agree for myself and for my heirs, representatives, agents and assigns, that I will not hold the NPSO liable.** I will waive and release any claims, demands or actions against them, for any damages to or loss of my property, or for my illness, injury or death, which results from or arises in connection with any NPSO field trip other than that which results from gross negligence.
7. **The persons and organizations covered by this agreement are:**
 - **NPSO**, its officers or members, and
 - **Any other participant(s)** in field trips including any people invited by any NPSO member(s), and
 - **Any of the agents or employees of the above** persons and organization.
8. **In addition, I agree to indemnify the above people for any claims made against them** on my behalf or otherwise, as a result of any damage to or loss of my property, or as a result of my injury or death, resulting from or arising in connection with the NPSO field trips, other than that which occurs as a result of the gross negligence of that person(s).

I HAVE READ THIS ENTIRE FORM, AND AGREE:

Signed: _____

Date: _____

Printed Name: _____