

Blue Ridge Young Birders Club Membership Information

Welcome to the Blue Ridge Young Birders Club. We are excited to have you join our growing organization. By joining BRYBC you will have the opportunity to bird local hotspots, listen to captivating speakers, and participate in wildlife conservation projects. It's time to step away from the computer, set down your homework and take a break in the great outdoors as you learn bird songs and identification skills, and simply have fun with friends who share in your passion. Enclosed in this application please find club information documents. Please feel free to contact us with any additional questions. After reading the enclosed information please fill out all necessary forms to complete your registration. There is a \$10 annual individual membership fee, or \$15 family membership for the BRYBC. Although everyone may attend open meetings of the BRYBC, to receive the full benefits of club participation including training manuals, email updates, newsletters, etc.. Membership is required. Field trips are only open to members of the club and their families as medical and liability forms must be filled out to participate. We look forward to seeing you out on the trail!

Good birding to all,

Mary Mapel

BRBYC Adult Coordinator

540-363-5035

info@blueridgeyoungbirders.org

PO Box 18, New Hope, VA 24469



***Please mail membership registration along with applicable fees payable to BRYBC and mail to:**

Mary Mapel
PO Box 18
New Hope, VA 24469

540-363-5035

Enclosed please find the following forms:

- *BRYBC Membership Information and application
- *BRYBC Code of Conduct
- *BRYBC Emergency Medical Authorization Form
- *BRYBC Health History and Examination Form
- *BRYBC Field Trip Permission and Liability Waiver Form
- *BRYBC Photograph Use Consent Form

Blue Ridge Young Birders Club Membership Information

CLUB STRUCTURE

BRYBC membership is open to all children ages 7 and older who demonstrate an ability to bird quietly alongside their peers without disturbing the enjoyment of birds by the other members. Youth under the age of 11 must be accompanied by an adult on all field trips and meetings. Some field trips may be restricted as they may be more suitable for the older members of the club, however most all of the outings and all of the meetings are open to the general membership. The older club members take pride in mentoring the younger members of the club.

CLUB ACTIVITIES

The BRYBC offers an extensive membership package, with bi-monthly meetings involving a diverse range of speakers as well as opportunities for monthly field outings. These may be field trips to birding hot spots, overnight trips, camp experiences or service projects (such as installing bluebird houses). BRYBC members also participate in community outreach programs speaking at organizations such as local 4-H clubs leading bird walks and educating others about bird identification, equipment use, and other related topics. We host an annual Hawk Watch Open House, participate in Kidvention and Earth Day celebrations. Club members may also choose to attend birding and other nature camps.

Field Trips

We offer many field trips in both the Piedmont and Shenandoah Valley, occasionally traveling on longer day trips outside our local region. BRYBC is not responsible for the transportation of young birders on field trips, and parents are encouraged to share carpooling responsibilities. We require an RSVP for field trips so that trip leaders know how many young birders can be expected on a trip.

PARENTAL INVOLVEMENT

Parental involvement varies from simply dropping off the students, to providing transportation and mentorship. We encourage parents to become active as much as possible in one of the many adult roles within the club. Parents are welcome to attend Young Birders Club field trips with their children, but the club's aim is to foster student interaction, youth leadership, and peer mentoring.

SOCIAL MEDIA

Email is the primary source of communication for club announcements about field trips and meetings. Please be sure to give us either your own or your parents email address in order that we may communicate effectively with you. BRYBC maintains a website with club information, announcements and useful birding information and links. There is also a BRYBC Facebook Group.

FUNDRAISING

The BRYBC requires funding for the general operations as well as special events. Special guest speakers require stipends, and public events require educational supplies. It is also important to recognize that good stewards of our natural resources require more than the ability to identify birds. BRYBC strives to give young people tools to empower them as strong conservation leaders.

Blue Ridge Young Birders Club Membership Application

First Name: _____ Last Name: _____

Age: _____ Birthday: (m/d/y) _____

Address: _____

Phone Number: _____ Alternate Phone Number: _____

Email: _____

Name of Parents or Guardians:

1) _____

Phone: _____ Cell: _____ Email: _____

2) _____

Phone: _____ Cell: _____ Email: _____

Tell us briefly about your interest and experience with birding. Please feel free to use additional paper if needed. Please describe any particular birding goals or desires that you may have that the club may be able to support you in achieving?

BRYBC Code of Conduct

Please read the following code of conduct. Participants and their parents or guardians must sign this form along with the emergency medical release form, photo release form and the general membership form before participating in BRYBC events.

The purpose of the BRYBC is to provide an opportunity for area youth to join together in their love of nature in general, and their passion for birding in particular. The club is intended to be governed for and by the youth, with adult mentorship and supervision as needed.

- * We expect all person's involved in BRYBC (youth and adults) to practice behaviors that foster mutual respect and encouragement of each member regardless of race, age, sex, or level of ornithological expertise. Trustworthiness, Respect, Caring, Responsibility, and Environmental Stewardship are expectations of BRYBC participants. Aggressive or abusive behaviors towards others is not permitted. Destruction of the environment will not be tolerated.
- * BRYBC will use various social media venues to keep members informed of club activities. Members agree to apply the above code of conduct in their online interactions, and avoid spamming or other abusive online behaviors.
- * Possession, distribution, or use of alcoholic beverages, illegal drugs, tobacco products, and unauthorized prescription drugs are not allowed at any BRYBC program or event.
- * BRYBC participants are expected to follow the instructions of their field trip and program leaders, as well as those of supervising adults.
- * Participants should remain at the BRYBC program/event until the scheduled end, unless parental approval is given for an earlier departure. Parents will provide timely pickup of their child after each meeting and field trip.
- * For the safety and wellness of all participants, a completed and signed BRYBC Health History Report Form is required for participation in club field trips.

Signatures:

Both signatures are required for participants under the age of 18.

Youth: I have read and understand the above Code of Conduct and will abide by the expectations described therein. I understand that if I behave inappropriately I will have to accept responsibility for my actions that may limit my participation in the club.

(print first and last name)

(signature)

(date)

Parent or Guardian: I have discussed and reviewed the above Code of Conduct with my child. I understand that the failure to abide by these rules may result in my child being restricted in club participation. I also agree to pick up my child in a timely manner after club meetings or field trips.

(print first and last name)

(signature)

(date)

Blue Ridge Young Birders Club Emergency Medical Authorization Form

Purpose - To enable parents and guardians to authorize the provision of emergency treatment for children who may become ill or injured while under BRYBC authority, when parents or guardians cannot be reached.

Student's Full Name (please print) _____

Address _____

Telephone _____ Grade _____

Birth Date: mm/dd/yy _____

Mother's Full Name _____ Phone ___ - ___ - _____

Father's Full Name _____ Phone ___ - ___ - _____

Guardian's Full Name _____ Phone ___ - ___ - _____

Part I - To Grant Consent:

I hereby give consent for the following medical care providers and local hospital to be contacted:

Name of Physician _____ Phone ___ - ___ - _____

Name of Dentist _____ Phone ___ - ___ - _____

Name of Preferred Hospital _____ Phone ___ - ___ - _____

In the event that reasonable attempts to contact me have been unsuccessful, I hereby give the Blue Ridge Young Birders Club representatives my consent for

(1) the administration of any treatment deemed necessary by the above named doctor, or in the event the designated preferred practitioner is not available, by another licensed physician or dentist;

and (2) the transfer of the child to a hospital reasonably accessible. This authorization does not cover major surgery unless the medical options of two other licensed physicians or dentists, concurring on the necessity of such surgery, are obtained prior to the performance of such surgery.

Please list facts concerning the child's medical history including allergies, medications being taken, and any physical impairment to which a physician should be alerted.

Signature of Parent or Guardian _____ Date _____

Part II - Refusal to Consent

I do NOT give consent for emergency medical treatment of my child. In the event of illness or injury requiring medical treatment, I wish Blue Ridge Young Birders Club authorities to take the following action:

Signature of Parent or Guardian _____ Date _____

Blue Ridge Young Birders Club Health History and Examination Form

Name _____

Birth Date: mm/dd/yy _____

Home Address _____ Phone ___ - ___ - ____

Custodial Parent/Guardian _____

Address _____ Phone ___ - ___ - ____

Second emergency contact _____

Address _____ Phone ___ - ___ - ____

Relationship to participant _____

Insurance Information: Is the participant covered by family medical/hospital insurance? Yes No
If so, indicate carrier or plan name _____ Group # _____

Carrier Address _____

Name of Insured _____ Relationship to participant _____

Social Security number of policy holder or insurance ID number _____

Participant's Medical Information

Please list all known allergies, describe reaction and management of reaction _____

List Any and all medication(s) being taken, or indicate that this person currently takes no medication on a regular basis _____

Use this space to provide any additional information about the participant's behavior and physical, emotional, or mental health about which we should be aware.

Blue Ridge Young Birders Club Field Trip Permission and Liability Waiver Form

Child's Name _____ Date _____

Address _____ City _____ State ____ Zip _____

Home Phone _____ Cell Phone _____

I (We) the parents of the above named child, who is a member of the Blue Ridge Young Birders Club (BRYBC), hereby give permission for the participation in any and all activities of the BRYBC during the current year. I (We) assume all risks and hazards incidental to the conduct of the activities and transportation to and from activities. I (We) do further release, absolve, indemnify, and hold harmless the Blue Ridge Young Birders Club, the organizers, sponsors, and all the supervisors, any and all of them. In case of injury to my child, I (We) hereby waive all claims against the organizers, sponsors, or any supervisors appointed by them. I (We) likewise release from responsibility any person transporting my child to and from scheduled activities.

(Signature of parent or guardian)

Address (if different from above)

Phone # (if different from above)

Blue Ridge Young Birders Club Photograph Use Consent Form

Dear Parents, From time to time throughout the year, an occasion may arise where we would like to publish a photo of your child in print and/or online publications of the Blue Ridge Young Birders Club or the Monticello Bird Club. By signing this form you are giving us permission to publish your child's photograph.

Child's Name _____

Signature of parent or guardian _____

Date: mm/dd/yy _____

Please complete and mail to: