

# Become a member, and receive program discounts today!

Yes! I would like to support  
The Trumbull Nature & Arts Center

- Student membership \$15/year
- Senior membership \$25/year
- Individual membership \$30/year
- Family membership \$50/year
- Bronze Patron \$250-499/year
- Silver Patron \$500-999/year
- Gold Patron \$1000 and up/year
- Corporate Benefactor \$2500-4999/year
- Corporate Founder \$5000 and above (lifetime)

Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

(e-mail address is needed so we can provide you with newsletters and updates.)

Phone Number \_\_\_\_\_

Yes! I would like to make a TAX DEDUCTIBLE\*  
contribution to the TNAC in the following amount:

\$25    \$50    \$100    \$500   Other \_\_\_\_\_



Please include this form and make check payable to:  
**Town of Trumbull/Nature Commission**

Mail to:  
Trumbull Nature Commission, PO Box 110438, Trumbull, CT 06611

We are located at 7115 Main Street, Trumbull  
(near the Trumbull/Monroe town line)



## TRUMBULL NATURE & ARTS CENTER REGISTRATION FORM

Participant/Child Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_

Participant/Child Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ TNAC Membership: Yes \_\_\_ No \_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home(\_\_\_\_) \_\_\_\_\_ Work:(\_\_\_\_) \_\_\_\_\_ Cell:(\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_



Please send payment with  
this slip to:

**Trumbull Nature  
Commission  
P.O. Box 110438  
Trumbull, CT  
06611**

PROGRAM TITLE	PARTICIPANT'S NAME	DATE	TIME	COST
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

(A current family membership (\$50) is required to receive  
member-discounted class rates)

TOTAL PAYMENT ENCLOSED \_\_\_\_\_

### Parental Permission Form – This section must be completed by a parent/guardian for all youth program registration.

I certify that my child, \_\_\_\_\_ is healthy and free of problems that could hinder his/her participation in Trumbull Nature and Art Center Classes. In case of injury, I wish to be contacted as soon as possible at the telephone listed above, or at this emergency number (\_\_\_\_) \_\_\_\_\_. If I cannot be reached, please contact \_\_\_\_\_, (relationship) \_\_\_\_\_ at telephone number(\_\_\_\_) \_\_\_\_\_. In the event of serious illness or injury which would require my child to be sent to a local hospital via ambulance, I understand that I am responsible for all charges either through health insurance or otherwise.

Does your child have any allergies or medical conditions? No \_\_\_ Yes, explain \_\_\_\_\_

Please note that if your child is assisted during the school year, we encourage you to accompany him/her during the program. Thank you for your consideration.

Cancellation Policy: The Trumbull Nature & Arts Center's cancellation policy states that reimbursement in full will be given only to classes that are cancelled by the Nature Center. A credit for classes will be given only with a 24 hour notice of cancellation by individuals registered for the class.

