

The 2025 TSWCD Junior Envirothon & Pymatuning/Shenango Watershed Challenge

Registration Form

Please type or neatly print

Team Name: _____

School: _____

School Address: _____ Phone: _____

City: _____ County: _____ Zip: _____

| <u>Name</u> | <u>Grade Level</u> | <u>Shirt Size (Adult)</u> |
|------------------------------|--------------------|---------------------------|
| Team Member: _____ | _____ | _____ |
| Team Member: _____ | _____ | _____ |
| Team Member: _____ | _____ | _____ |
| Team Member: _____ | _____ | _____ |
| Team Member: _____ | _____ | _____ |
| Alternate Team Member: _____ | _____ | _____ |

Advisor Name: _____ Advisor Shirt Size _____

Cell Phone: _____ E-mail address: _____

This team is new to the program (did not compete last year) _____ YES _____ NO

**NOTE: All teams must be registered for the competition by
FRIDAY, SEPTEMBER 26, 2025.**

**Mail, e-mail, and fax registrations are accepted. Return forms to Trumbull SWCD – 520 W. Main
Street, Suite 3– Cortland, Ohio 44410
or email to trumbullswcd@gmail.com
or fax to 330-637-0071**

Teams consist of 3-5 students.

Only **REGISTERED** team members may participate in the 2025 Trumbull SWCD Junior Envirothon & Penn Ohio Watershed Association Pymatuning/Shenango Watershed Challenge event.

2025 Trumbull County Junior Envirothon & POWA Watershed Challenge Release Form

Event Date: Wednesday, October 8, 2025

This form is to be completed by each student's parent/guardian and returned to:
Trumbull SWCD

*Attn: Amy Reeher
520 W. Main Street, Ste. 3
Cortland, Ohio 44410*

or by Fax: 330-637-0071 or by Email: trumbullswcd@gmail.com

This form must also be completed and signed by each advisor/coach and volunteer that attends the Trumbull County Junior Envirothon & Penn Ohio Watershed Association Pymatuning/Shenango Watershed Challenge.

Attendee's Full Name (please print) _____

Home Address _____
Street, City, State, and Zip Code

Home Phone _____ Parent/Guardian Work Phone _____

Emergency Contact _____ Phone _____

Relationship to the Attendee _____

Medical Insurance Provider _____ Policy # _____

Allergies (food, medications, insects, etc.) _____

Medical Conditions (asthma, diabetes, etc.) _____

Medications Currently Being Taken _____

I understand the Junior Envirothon & Watershed Challenge may be strenuous, and adverse weather conditions may occur. Nevertheless, I assume the risk involved. I have been assured that all reasonable care will be taken to prevent incident: therefore, I will not hold the Trumbull County SWCD, the Penn Ohio Watershed Association, its partners, or the host site liable should an accident occur. I give my consent to the use of any photographs, videos taken of me by officials of the event or their representatives to be used for promotional and/or editorial purposes only. This consent includes the use of any remarks made during the event, in the evaluation, and/or during any awards distribution to be used in promotional and/or editorial purposes only.

Signature of Participant _____ Date _____

I (please Print) _____ give permission for my child, _____
parent/guardian student's name

to participate in the Junior Envirothon & Watershed Challenge.

Signature of Parent/Guardian _____ Date _____