



Stough Canyon Nature Center Youth Docent Program – Now Recruiting!

Dear Student:

The City of Burbank Parks and Recreation Department is recruiting for Youth Docents.

The Youth Docent Program is for middle school and high school students that allows you to:

- Gain valuable work experience
- Learn nature related subjects
- Enhance your resume
- Earn volunteer service learning hours
- Give back to the community and have fun

Students will learn information needed to assist with nature hikes, classroom presentations, trail maintenance and general customer service at the Nature Center. Youth Docents will also assist with Nature Camps, field trips, and other youth programs. This experience will help teens to develop a variety of skills, including communication, organization and public speaking. **Program session dates are from March 19 – July 31.**

Program Requirements:

- Attend scheduled training sessions
- Complete 50 hours of volunteer service in Nature Camp Programs
- Coordinate and lead two nature related activities throughout the Junior Docent session
- \$25 fee due by first training session
- Rate Satisfactory or above on periodic evaluation
- Attend scheduled trainings as listed on application (may not be absent for more than 2 trainings)
- Be enrolled in middle or high school and under the age of 18.

To apply, submit a complete application as follows:

Delivered to: Stough Canyon Nature Center – 2300 Walnut Ave., Burbank, CA 91501

Emailed to: NatureCenter@Burbankca.gov

Application Available Online at: www.burbankca.gov/naturecenter

Deadline: March 15, 2020

Stough Canyon Nature Center

General Information

Facility Hours:

Sunday: 11AM -5PM

Monday: 1PM - 5PM (June-August 9AM – 5PM)

Tuesday – Saturday: 9AM – 5PM

Programs and Events:

- Fitness Hike : Tuesdays (6:30 PM)
- Moonlight Hike: January- October (dates/times vary)
- Wild Creatures Hike : Last Sunday of the month (11:30 AM)
- Egg-Sight-Ment in the Wild : March 29, 2020 (10 AM)
- Scavenger Hunt: November
- Haunted Adventure: October (multiple days)
- Noon Year's Eve: December
- Winter in the Wild Winter Camp: December/January
- Verdugo Mountain Explorers Spring Camp: March 23 – March 27
- Stough Canyon Nature Experiences Summer Camp : June 1 – July 31
- Youth Docent Program
- Adult Docent Program
- Nature Tot Program : Fall, Winter, Spring
- Woodcarvers Workshop : Wednesdays (1 PM)

* Programs are subject to change and not limited to events listed above*

Contact Information:

Address: 2300 Walnut Ave., Burbank, CA 91501

Phone: 818-238-5440

Email: NatureCenter@Burbankca.gov

Website: www.burbankca.gov/naturecenter

Instagram: [@burbank_naturecenter](https://www.instagram.com/burbank_naturecenter)

Youth Docent Program Application

Name _____ Grade Completed _____ Date of Birth _____ Age _____

Address _____ Zip Code _____

Cell Phone () _____ Home Phone () _____

E-mail _____ School _____

Parent/ Guardian Name _____ Cell Phone () _____

Email _____ Day Phone () _____

Answer the questions below. Please print neatly on this form or type your response.

1) Why do you want to participate in the Youth Docent Program?

2) Please list your extracurricular activities in school and/or afterschool?

3) What are your interests and/or hobbies related to nature, science, etc?

4) Please list any relatives that work for the City of Burbank Parks & Recreation Department. If none, write N/A.

5) Please list any relatives that are also applying for the Youth Docent Program. If none, write N/A.

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Scheduled trainings are mandatory.

- March 19, 2020 : 4-5:30 PM **Nature Center Information**
- March 23 – 27, 2020 (3 days): 8:30 AM – 12:30 PM **Spring Camp**
- April 2, 2020 : 4-5:30 PM **General Natural History & Ecological Concepts**
- April 16, 2020 : 4-5:30 PM **Plants**
- April 30, 2020 : 4-5:30 PM **Animals**
- May 14, 2020 : 4-5:30 PM **Indians & History**
- May 28, 2020 : 4-5:30 PM **SWAP: Small Wilderness Area Preservation**

*Additional trainings may be added throughout the program session. Notice will be given.

Schedule Preference/Availability

___ Monday

Times Available: _____

___ Wednesday

Times Available: _____

___ Friday

Times Available: _____

___ Sunday

Times Available: _____

___ Tuesday

Times Available: _____

___ Thursday

Times Available: _____

___ Saturday

Times Available: _____

Activities/Programs of Interest: _____

Youth Docent Program Application

PERMISSION TO PARTICIPATE WAIVER, RELEASE OF LIABILITY & MEDICAL EMERGENCY TREATMENT

I HEREBY ACKNOWLEDGE that I have voluntarily applied to participate in this program. I promise and agree at all times to adhere to the rules established by the program.

I am voluntarily participating in this program with knowledge of the risks involved. I hereby agree that to accept any and all risks of injury, death, or property damage associated with this program.

As a condition of the City of Burbank's permitting me to participate in this program, I HEREBY AGREE that, to the maximum extent of the law, I and my heirs, distributees, guardians, legal representatives, and assigns WILL NOT MAKE A CLAIM AGAINST, SUE, OR PROSECUTE the City of Burbank, its officers, agents, and employees for any injury, death or property damage resulting from negligence of any officer, agent, or employee of the City of Burbank as a result of my participation in this program.

In addition, I HEREBY RELEASE AND DISCHARGE the City of Burbank, its officers, agents, and employees from and against ALL ACTIONS, CLAIMS, OR DEMANDS on behalf of myself and my heirs, distributees, guardians, legal representatives, or assigns for any injury, death, or damage resulting from my participation in this program.

I ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT AND THAT I AM AWARE THAT THIS IS A WAIVER AND RELEASE OF LIABILITY BETWEEN MYSELF AND THE CITY OF BURBANK, AND I SIGN IT OF MY OWN FREE WILL.

Participant Full Name (Print)

Participant Signature

Date

WAIVER AND RELEASE – MUST BE SIGNED BY PARENT/GUARDIAN

The undersigned _____ (name of parent/guardian) referred to as the parent and natural or legal guardian of _____ (minor participant's name) does hereby represent that he or she is, in fact, acting in such a capacity and BY THE SIGNATURE BELOW, THIS PARENT/GUARDIAN FURTHER ACKNOWLEDGES AND AGREES TO BE BOUND BY THE TERMS OF THE WAIVER AND RELEASE OF LIABILITY SIGNED BY THE MINOR FOR PARTICIPATION IN THE CITY OF BURBANK NATURE VOLUNTEER PROGRAM.

Signature of Parent/Guardian

Relationship to Minor

Date

MEDICAL EMERGENCY TREATMENT CONSENT

As a parent/guardian, I hereby consent to treatment of my minor child for any and all medical procedures deemed necessary as a result of accident or injury or illness. Consent is given for any licensed physician, surgeon, accredited medical personnel, or City personnel to give medical attention and to administer such treatment, drugs, and/or medicines, and to perform such medical procedures as is deemed necessary based on the existing medical situation. I further understand that the City of Burbank will not be providing medical insurance and that I am responsible for payment in full of any payments due as a result of said treatment.

Signature of Parent/Guardian

Date

Current Medications: _____

Special Considerations (medical conditions, physical limitations, allergies, etc): _____

PHOTO RELEASE

I grant the City of Burbank permission to use my or my child(ren)'s photographs and images for the purposes of publicizing and marketing City activities. I understand that no compensation shall be given for use of these photographs and that these images shall become the sole property of the City of Burbank.

Signature of Parent/Guardian

Date