

NPSO Annual Meeting, May 29-31, 2020
Spirit Mountain Lodge, Grand Ronde, Oregon
<https://annualmeeting2020.npsoregon.org>

REGISTRATION FORM

COMPLETE A SEPARATE FORM FOR EACH REGISTRANT
REGISTRATION DUE BY APRIL 16. NO REFUNDS AFTER APRIL 24.

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: _____

How to register: Print out the registration form and waiver. Mail the completed form, signed waiver, and check or money order. If you use automated checking, your trip preferences will be reserved for 10 days for payment to be received (*make sure your name is on the check*). **Make check or money order payable to NPSO Cheahmill Chapter.**

Send completed registration form, field trip preferences, signed waiver, and full payment to: NPSO c/o Lisa Blackburn, 1808 N. Emery Drive, Newberg OR 97132.

Registration: \$35 (covers facility costs, stipends, and Sunday board meeting) \$ _____
Late Registration (after April 16): **\$50**

Meals: All meals provide vegetarian, vegan, and gluten-free options.
Options will be labeled at the Friday and Saturday dinners.

Please check all that apply: _____Vegetarian _____Vegan _____Gluten-free

Friday "Tour of Italy" buffet \$22: beef lasagna, penne pasta with marinara and alfredo sauces, shrimp, grilled chicken breast, vegetables, garlic bread, tossed green salad, two chef-selected salads, dessert, coffee, tea. \$ _____

Saturday box lunch \$17.50: sandwich, potato salad, apple, carrots, cookie (bring your own beverage).
Please check:
____Deli (ham/turkey) _____Roast beef _____Grilled chicken _____Veggie \$ _____

Saturday banquet buffet \$26.50: cedar-plank salmon, tossed green salad, two chef-selected salads, garlic mashed potatoes, vegetable, rolls/butter, dessert, coffee, tea. \$ _____

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

Total Enclosed: \$ _____

Accommodations: You are responsible for your own lodging. See the link to lodging options on the annual meeting website (above). Spirit Mountain Lodge block rooms are guaranteed until April 27. We recommend that you reserve your lodging as soon as possible.

Field trip assignments: Field trips will be assigned in the order that completed registration forms with a check or money order are received in the mail. Electronic payments must be received within 10 days of receipt of your registration form to maintain field trip assignments and must clearly identify the name(s) of attendee(s).

Field trip preferences: Indicate field trip preferences by name and number as described on the meeting website (above) and in the eBulletin.

Friday, May 29

1st choice: _____

2nd choice: _____

3rd choice: _____

___ Check if you need to be on the same field trip with another member and indicate member's name:

Saturday, May 30

1st choice: _____

2nd choice: _____

3rd choice: _____

___ Check if you need to be on the same field trip with another member and indicate member's name:

Sunday, May 31

1st choice: _____

2nd choice: _____

3rd choice: _____

___ Check if you need to be on the same field trip with another member and indicate member's name:

___ Check here if you will attend the **NPSO State Board meeting** on Sunday morning, May 31, 9 am to noon. Coffee and tea will be provided.

Questions? Email: annualmeeting@npsoregon.org.
Please make a copy of all materials 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 for coming on an NPSO field trip! This 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. I understand that some parts of the field trips may be hazardous and may 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: _____ Printed name: _____ Date: _____

*To be retained for 5 years by NPSO Chapter Secretary.