



STUDENT REGISTRATION FOR OUTDOOR EDUCATION COURSE

State Form 42725 (R3 / 1-12)
DEPARTMENT OF NATURAL RESOURCES
LAW ENFORCEMENT DIVISION

DIRECTIONS: Please Print.

When any segment of the education course is not conducted during scheduled school hours the consent of the parent or guardian is required for those students under the age of eighteen (18). (See other side.)

Type of course			
<input type="checkbox"/> Hunter	<input type="checkbox"/> Boater	<input type="checkbox"/> Snowmobile	<input type="checkbox"/> Trapper
Name (last, first, middle)		Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Address (number and street, city, state, and ZIP code)		Date of birth (month, day, year)	
Name of sponsoring organization		Course dates (month, day, year) From: _____ To: _____	
Have you ever taken this education course before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, what is your certification number?	
Where did you take the course?			
Name of instructor		Signature of student	

GUARDIAN'S LIABILITY RELEASE

I give my consent for my son / daughter _____ to attend this education course, and I hereby release the State of Indiana, its Department of Natural Resources, the personnel and volunteer instructors of said department from all actions, damages and claims, or demands which I, my heirs, executors, administrators, or assigns may have against any, or all of the above mentioned parties, for all personal injuries known or unknown, and injuries to property, real or personal, cause by, or arising out of, any activities affiliated with this education course.

I, the undersigned parent or guardian, have read this release and understand all its terms.

Signature of parent or guardian	Date (month, day, year)
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LIABILITY RELEASE (To be completed by those applicants over the age of eighteen (18) whereas, consent of guardian does not apply).

I, _____ desiring enrollment in this education course, do hereby release the State of Indiana, its Department of Natural Resources, the personnel and volunteer instructors of said department from all actions, damages and claims, or demands which I, my heirs, executors, administrators, or assigns may have against any, or all of the above mentioned parties, for all personal injuries known or unknown, and injuries to property, real or personal, cause by, or arising out of, any activities affiliated with this education course.

I, the undersigned parent or guardian, have read this release and understand all its terms.

Signature of applicant	Date (month, day, year)
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