



## Youth Mentoring Program Registration Packet

**About the Alaska Songbird Institute (ASI):** ASI is a nonprofit organization based at Creamer's Field in Fairbanks. Our mission is to conserve Alaska's boreal birds through ecological education & research. Visit [alaskabird.org](http://alaskabird.org) for more information about our research and education programs.

**Program Description:** ASI's youth mentoring program is a unique volunteer program for kids ages 10-14 who are interested in birds, wildlife, science, and conservation. Kids volunteer alongside ASI biologists and our high school interns on a long-term nest box monitoring project at Creamer's Field. Together we monitor approximately 50 active Tree Swallow nests each season from egg laying through the fledging of chicks. We track the timing, productivity, and success of each nest. We also capture and band the adult birds. Nestlings are banded when they turn 11-days old. We work together as a team. Everyone receives their own field notebook and is an active participant in collecting data.

Kids in the youth mentoring program have the opportunity to:

- Check nest boxes and record egg counts, hatch and fledge dates
- Capture adult Tree Swallows and release them after banding
- Retrieve and transport nestlings to/from nests
- Watch nest boxes to record fledging
- Record data, collect nests, repair boxes, and many other things that help make field research successful!

**Schedule/What to Expect:** This year's project will run from approximately **May 12-June 27**. There may be a few extra volunteer opportunities before and after these dates. Our schedule is flexible and variable. It is determined by when the birds arrive and how the nesting season progresses, as well as the weather. Time slots are generally 2-3 hours on weekday mornings and are weather dependent.

For the first couple of weeks we are out for two hour shifts, three days per week (Mon, Wed, Fri), to record egg laying and incubation. Once nests begin to hatch in early to mid June, we will be out every weekday day morning. After we finish banding, things slow down again. This is usually about the last week of June.

Our primary method of communication with parents/guardians is via email. Please ensure all email addresses you would like on the contact list are on this registration form. ASI staff maintain an online google calendar of available field times. Kids/parents can sign up for the dates and times that work for their schedule.

We ask kids to volunteer a minimum average of about 4 hours/week, and they are invited to volunteer as much as they would like. It is okay to miss time for camps, trips, and other summer fun! Keep in mind that our busiest and most exciting time is usually the second and third weeks of June. This is when we are capturing the most birds (and need the most helping hands). Kids who miss this timeframe are usually very disappointed!

**Program Requirements:** Participants must be 10-14 years old on or before May 12, 2025 and:

- Possess a sincere interest in nature, birds, science, and/or conservation
- Enjoy learning, have a positive attitude, and like to spend a lot of time outside. We are out for 2-3 hours at a time, walking in all kinds of weather (often amongst millions of mosquitoes!)
- Be able to walk, bike, or otherwise access the nesting boxes at Creamer's Field. *We strive to make our programs accessible to everyone. If mobility may be a challenge, please contact us to discuss options.*

**Program Fee:** \$275 per child (\$250 for current ASI members). For information on ASI membership, visit [aksongbird.org](http://aksongbird.org).

**To Register:** Submit the registration packet and fee online, or mail a hard copy and check to Alaska Songbird Institute, P.O. Box 80235, Fairbanks, AK 99708. Checks should be made payable to Alaska Songbird Institute. A PDF may also be submitted electronically to Tricia at: [tricia.blake@aksongbird.org](mailto:tricia.blake@aksongbird.org). ***This is a small program that fills quickly. We recommend submitting your registration as soon as possible.***

## ASI YOUTH MENTORING REGISTRATION FORM 2025

### PERSONAL INFORMATION

Name		Age
Parent(s)/Guardian(s)		
Date of birth	Grade	School
Current address		
Phone	Email(s)	

### INTERESTS & SKILLS (USE THE BACK OR ADDITIONAL PAGES IF NECESSARY)

What do you like to do? Tell us about your favorite way to spend your time.

Have you ever volunteered to help people, animals, or at an event before? Tell us about it.

Why are you interested in helping ASI study birds? (If you have done this before, what do you hope to learn this year?)

### SIGNATURES

Student	Date
Parent/Guardian	Date



## Alaska Songbird Institute Waiver of Liability & Photo Release

Child's Name: \_\_\_\_\_ Date: \_\_\_\_\_

will be volunteering with the Alaska Songbird Institute. I understand that while working in the field they may encounter a variety of risks. I have been made aware of what these risks might be and have received information on how to minimize any risk. I fully understand and agree to the following:

1. I am aware of the inherent dangers involved and I freely and knowingly assume all risks to my child and their property. Inherent dangers are likely to include but are not limited to: difficult footing and uneven terrain; exposure to hot, cold, and/or wet weather; possible exposure to moose, bears, and other wildlife; exposure to sun, insects, and other environmental hazards; and the possibility of being scratched or pecked by a bird.
2. I will ensure my child is aware of the inherent dangers involved and is prepared for work in the field each day with appropriate clothing, footwear, sunscreen, insect repellent, snacks, water, hand sanitizer, bike helmet when applicable, and all other supplies.
3. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. At times federal, state, and local governments and health agencies have recommended vaccination, social distancing, wearing masks, frequent hand washing, and sanitation and have prohibited the congregation of large groups of people. The Alaska Songbird Institute has put in place preventative measures to reduce the possible spread of COVID-19. These safety protocols include but are not limited to: working in small groups (<15), holding all activities outside, encouraging frequent hand sanitation, and cleaning and sanitizing shared project equipment each day. I fully understand that ASI cannot guarantee that we will not become infected with COVID-19.
4. By signing this agreement, I acknowledge that I am aware of the inherent dangers involved and I freely and knowingly assume all risks to my child and their property. We voluntarily assume the risk of working on public lands and volunteering for the Alaska Songbird Institute, including but not limited to, that we may be exposed to or infected by COVID-19. I agree to hold harmless and indemnify ASI and its officers and employees, from and against any and all actions, suits, damages, liability or other proceedings that may arise as the result of my choice to allow my child to volunteer.

Name of Parent/Guardian (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

I hereby give permission for the Alaska Songbird Institute to use my child's portrait, photograph, artwork or images to promote the organization, its programs, and achievements. Such use includes but is not limited to using images in public presentations, publications (print or electronic), grant applications, brochures, displays, reports, and on web pages and social media.

Name of Parent/Guardian (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



## ASI Youth Volunteer Health Information & Emergency Contact Form

Student Name \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian (to be the first point of contact in case of an emergency)

Parent/Guardian Name \_\_\_\_\_

Preferred Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Emergency Contact (to be contacted if a first point of contact cannot be reached):

Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Preferred Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Address \_\_\_\_\_

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergic Reaction to: Penicillin \_\_\_\_\_ Bee Stings \_\_\_\_\_

Food \_\_\_\_\_

Other allergies \_\_\_\_\_

Is your child currently taking any medication? (name and explain) \_\_\_\_\_

Does your child require any special (emergency) medication? (name and explain) \_\_\_\_\_

If your child has any physical, social, or emotional needs that require special attention, or if there are other considerations for your child's well-being that are not otherwise covered on this form, please share them with us here.

**\*\* Medications, even things like aspirin, BENADRYL, & TYLENOL, *can not* be given out by ASI staff. If you feel your child may need such items, please send it with them and ensure they are prepared to self-administer the medication.**

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_