



Morris Grover, Volunteer Coordinator
 Whale Watching Spoken Here
 Beverly Beach State Park
 198 NE 123rd Street
 Newport, OR 97365



Training Registration and Volunteering Form

Please use this form to register for trainings and winter and spring volunteer opportunities.
 Mail to address above, or return by e-mail to morris.grover@state.or.us, or by FAX to 541-765-3402.

Please make a copy for yourself before sending.

Sign Up for Training

Register early to secure a spot.

I am (we are) veteran rookie volunteer(s) and will be attending the whale watch volunteer training at:

Name _____
 Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____
 Email Address _____

- Newport, Hatfield Marine Science Center, December 5-6, 2009
 Number of reservations _____
- Charleston, OR Institute of Marine Biology, January 23-24, 2010
 Number of reservations _____
- Lewis and Clark Interpretive Center, Illwaco, WA, Feb 20-21, 2010
 Number of reservations _____

Choose Site #s from Cover Map Sign Up Below for Watching Sites Must be Staffed 10 a.m. - 1 p.m.

Winter Watch 2009-2010

1st choice / 2nd choice

Sat 26 Dec _____ / _____
 Sun 27 Dec _____ / _____
 Mon 28 Dec _____ / _____
 Tue 29 Dec _____ / _____
 Wed 30 Dec _____ / _____
 Thu 31 Dec _____ / _____
 Fri 1 Jan _____ / _____

Spring Watch 2010

1st choice / 2nd choice

Sat 20 Mar _____ / _____
 Sun 21 Mar _____ / _____
 Mon 22 Mar _____ / _____
 Tue 23 Mar _____ / _____
 Wed 24 Mar _____ / _____
 Thu 25 Mar _____ / _____
 Fri 26 Mar _____ / _____
 Sat 27 Mar _____ / _____

Choose Site #s from Cover Map

Pre Pay: Whale Watch Training

Previous attendants may audit class free: Check here

Total attending training _____ @\$20 = \$ _____
 Pay at the door amount _____ @\$25 = \$ _____

Print Attendee Name(s) below as you'd like it to appear on name badge

1 Free T-shirt with each paid registration. Please indicate color and size.

Color (navy, red, black, green)	Size (s-xxx)	Quantity	Price
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Other Items _____	_____	_____	\$ _____

Shipping flat rate \$5.00 for any mailed items. Do not add postage if picking up at training: \$ _____

Credit Card (Visa, MC only) # _____
 Exp _____ / _____
 Signature _____ Date _____

Optional Donation to the Program: \$ _____
 Grand Total: \$ _____