



# JR. STEWARDS OF THE "UPPER MISS" REFUGE PROGRAM

## 2020 REGISTRATION FORM

### Junior Stewards

Name: \_\_\_\_\_

Prefers to be called: \_\_\_\_\_

Grade Level \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Vest Size: \_\_\_\_\_ Youth or Adult (Circle one)

Address: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_

### Parent(s) or Guardian(s)

Name \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Name \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

### Medical Information:

Emergency Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Allergies? \_\_\_\_\_

Any physical or medical limitations?

\_\_\_\_\_

Mail to:

Upper Mississippi River  
National Wildlife and Fish Refuge

7071 Riverview Rd. Thomson,  
IL 61285

Phone: 815-273-2732 Fax:  
815-273-2960

E-mail:  
Jacquelynn\_Albrecht@fws.gov

Website:  
www.stewardsumrr.org

