This form is for Bird Quest only. To register for the Pre-Event Birding Workshop on August 27th, click HERE.

Team Leader Name: ______________________________________________________________
(Team leader must be 18 or older and have a valid driver's license)

Email (for confirmation): _____________________________________________________________

Team Name: _____________________________________________________________________
(Prize for most creative name!)

List number of people on team (required): __________

List ALL team members. Include email addresses for those who will be attending the Quest Celebration! via Zoom.

1. _______________________________________________________
2. _______________________________________________________
3. _______________________________________________________
4. _______________________________________________________
5. _______________________________________________________
6. _______________________________________________________
7. _______________________________________________________
8. _______________________________________________________

List number of t-shirts by size, needed for your team. If we know what you need, we can have them ready at Check-In!

Youth Medium _______
Adult Small  _______
Adult Medium _______
Adult Large  _______
Adult XL  _______
Adult XXL  _______

By signing below, I acknowledge that I am aware of the risks inherent in outdoor activities such as the Chagrin River Bird Quest, and hold the Audubon Society of Greater Cleveland blameless in any event of injury or illness to me or my team while participating in this event.

Signature of Team Leader: ______________________________________ Date: ______________
(Your printed name serves as a signature for on-line registration.)

Mail to:
Bird Quest Registration
P.O. Box 391037
Solon, OH 44139