

DOUG TARRY YOUNG ORNITHOLOGIST'S WORKSHOP

APPLICATION FORM

Please return this application and all necessary attachments to Doug Tarry Bird Study Awards, Long Point Bird Observatory, P.O. Box 160, 115 Front Rd. Port Rowan, Ontario, N0E 1M0.

Award winners will be notified by mail within the first two weeks of May.

Name:

Address:

City:

Province:

Postal Code:

Phone:

E-mail:

Age: _____ **Present (or last completed) Grade:** _____

Citizenship:

How did you find out about this workshop?

How many species of Canadian birds are you able to identify (circle one)?

30-50

51-75

76-100

101-125

>125

About how many different species of birds have you seen in your life? _____

At what age did you become interested in birds? _____

List any other interests you have in science and/or natural history:

List any natural history clubs or organizations you belong to:

What career(s) are you thinking of pursuing?

Physical health (circle one): **Fair** **Good** **Excellent**

Allergies:

Parents'/Guardians' Name(s):

Phone number(s) where parents/guardians can be reached:

Home:

Business:

Please attach a letter of support from one adult reference (for example a teacher, scout leader, head of naturalist club). This letter should attest to your ornithological interest and skills.

Name:

Position:

Relationship to you:

Address:

Phone:

City:

Province:

Postal Code:

On a separate page(s), please:

a) Write a one-page essay about why you want to participate in this workshop.

AND

a) Write a one-page essay telling us what your favourite bird is and why, OR

b) Illustrate your favourite bird (in black & white or colour).

Your Signature: _____

Date: _____

Signature of Parent or guardian: _____

Date: _____