

Sugar Grove Nature Center Program Registration Form

Use this form to register for Nature Center Programs requiring Pre-Payment with Registration.

Program Information

Name of Program Registering For: _____

Date of Program Registering For: _____ Time: _____

Registrant Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Other Phone #: _____

Email Address: _____

Additional Note: _____

Adults: _____ # Children: _____

Yes, I am proud Nature Center member.

No. I am not a member.

Applicable Program Fee: _____

Payment Information

Today's Date: _____ Check Enclosed in the Amount of: _____ Check #: _____

Please Make Check Payable to Sugar Grove Nature Center

Return this form with payment to:
Sugar Grove Nature Center
Attn: Registration
4532 N 725 East Road
McLean, IL 61754

If you have questions contact us at register@sugargrovenaturecenter.org or 309.874.2174