



Earth Protection Agent Program  
Registration Form

Name of Organization/School: \_\_\_\_\_  
Name of Contact/Leader: \_\_\_\_\_  
Day Phone #: \_\_\_\_\_ Eve. Phone: \_\_\_\_\_  
e-mail: \_\_\_\_\_

(please print)  
Name of New Agent: \_\_\_\_\_  
e-mail: \_\_\_\_\_  
Day Phone #: \_\_\_\_\_ Eve. Phone: \_\_\_\_\_

(circle one)  
T-shirt size: Child: med lrg Adult: sm med lrg xlg

New Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(under 18 yrs. old)  
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Office use only)  
Training date: \_\_\_\_\_  
Training complete: Y \_\_\_ N \_\_\_  
Hands-on complete date: \_\_\_\_\_  
Educational component date: \_\_\_\_\_  
Swear in date: \_\_\_\_\_  
T-shirt: Y \_\_\_ N \_\_\_  
Certificate: Y \_\_\_ N \_\_\_  
ID: Y \_\_\_ N \_\_\_