

Program Request Form

Please email the completed form to Natural Resource Coordinator, Lisa Sons at lisa.sons@illinois.gov

Please mark the box next to the interpretive hike that your group is requesting.

November through May, W, Th, and F only.			
1-hour 15 minute Interpretive/Educational F	like to Starved Rock.		
1.5-hour Interpretive/Educational Hike to Sta	arved Rock and French	ı Canyon	
January W, Th, and F only.			
1-hour Educational Eagle Watch Hike to Star	ved Rock.		
June through October, M, and F only.			
1-hour 15 minute Interpretive/Educational F	like to Starved Rock.		
1.5-hour Interpretive/Educational Hike to Sta	arved Rock and French	ı Canyon.	
2-hour Interpretive/Educational Hike to Over	rlooks, French, and Wi	ildcat Canyons.	
oup Name:Date Request Sent:			
Contact Person Name:			
Email Address:			
City St	tate Phone #: _		
# of Participants (10 min/40 max): adults	children	Age/Grade Level:_	
Date of Visit (please include 3 date options): 1.	2	3	
Time of Program (please include 3 options): 1	2	3	
Special Needs or Requirements?			
Will Your Group Require Use of the Eagle Roost C	abin for Lunch? Y	N Time:	
Activity Permit and Release of Liability Forms Turbate:	rned in to <u>DNR.Starve</u>	dRock@illinois.gov?	Y N
Office Use	· · · · · · · · · · · · · · · · · · ·		Office Use
Date Approved/Scheduled:	NRC Signature		
Activity Permit/Release of Liability Received/App	proved (Groups of 20 c	or more): Y N	N