

Concord Youth 2 Youth

APPLICATION FORM 2008 - 2009

STUDENT NAME: _____

Address: _____

City _____ State _____ Zip _____

DOB: _____ Grade this year: _____

E-Mail address: (If student doesn't have e-mail you may put a parent's e-mail):

Home Telephone #: (_____) _____

Have you participated in any other advocacy programs in the past?

Yes No If yes, which programs _____

PARENT'S INFORMATION (where applicable):

MOTHER/Guardian

Name: _____

Tel. Work: _____ Cell: _____

Home: _____ Other: _____

Email: _____

FATHER/Guardian

Name: _____

Tel. Work: _____ Cell: _____

Home: _____ Other: _____

Email: _____

Other Emergency Contact: _____

STUDENT NAME: _____

STUDENT'S AVAILABILITY:

A **Y2Y ACTION TEAM MEMBER** will be involved with one of our teams of 10-20 students who work on drug prevention projects together. Students are placed on different teams based on skill, experience, space and interests. These teams meet on a set day each week and conduct prevention or service projects in the schools and community.

Are there any days of the school week that you would NOT be able to regularly attend meetings due to another activity or commitment?

If so, which day(s)? _____

Have you been to any specialized leadership training programs?

If so what and when: _____

CHECK OFF YOUR INTERESTS:

- Making or recording radio Public Service Announcements (PSA's).
- Learning to edit or produce video presentations on a computer.
- Learning to act in skits and short plays.
- Presenting to groups of youth and adults about Youth to Youth.
- Helping to organize and run events such as the D.A.R.E. party.
- Participating in activities such as park clean-ups.
- Taking part in games and activities that build teamwork skills.
- After school intramural sports such as floor hockey.

COST OF PROGRAM:

Concord Youth to Youth is primarily funded through user fees for those participating in some activities, community donations, small grants, the Concord Police Department and Concord Substance Abuse Coalition (CSAC).

<p>PLEASE NOTE: There is no cost for those willing to participate in the basic Youth to Youth regular activities. In the event that we will plan other specialized activities such as recreational events that may require a separate fee at that time, but only for those who choose to participate.</p>
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PROGRAM WAIVERS

To Be Completed by Parent or Guardian

Print Parent's Name: _____

Print Student's Full Name : _____

LIABILITY WAIVER:

I agree to allow my son/daughter to participate in the Concord Youth to Youth Program. I understand that many Youth to Youth activities could result in injury during events or during transportation to and from events. I agree to waive any liability or right of civil action against the City of Concord, Concord Police Department, Concord Youth to Youth, the Concord School District, and any of the associated staff, volunteers, sponsors or other agents of the Concord Youth to Youth Program for any negligence or acts or omissions that are related to my son/daughter's participation in any Youth to Youth related activity. **In the event of an emergency where I cannot be reached, I give my permission for the adult staff of Concord Youth to Youth to act on my behalf in requesting emergency medical care for my son/daughter.**

Parent's Signature

Date

COMPREHENSIVE MEDIA WAIVER:

I understand that Youth to Youth activities frequently result in media coverage. I agree to allow my child's photo or statements to reporters to be used in any news account, press release, or media report on Youth to Youth activities; whether TV, radio or print. My child may volunteer to participate in the production of any radio or video or TV PSA or media appearance associated with Concord Youth to Youth. My child's photo may appear in the Y2Y web site and he or she may participate in videos produced by Y2Y and linked to the Police Department or Y2Y web site.

Parent's Signature

Date

Y2Y POLICY ON GRADES AND LEAVING SCHOOL:

Students that get to participate on an action team are often given the opportunity to sign up for presentations and activities that take place during their school day. They are never mandated to do so and Y2Y staff makes every attempt to monitor grades of team members. Poor performance in school will disqualify a student from these activities and parents may also request at any time that their student not be used on projects that cause a loss of any class time. I authorize my child to participate in Y2Y activities/events that take place during regular school hours with the understanding that I may withdraw that permission for poor grades or other reason. I authorize the Youth to Youth Program Coordinator to receive information from the school on my child's grades, progress reports and school performance, to include discipline issues.

Parent's Signature

Date

THIS COMPLETED FORM IS TO BE FILED AND FORWARDED WITH ALL OTHER YOUTH TO YOUTH RECORDS TO THE COMMUNITY RESOURCE UNIT.