

Participant Registration

(To be completed by the Parent/Guardian on behalf of the child)

Participant Information

Participar	nt Name:	Last	First M.I.			Date:		
		Last		First		М.І.		
Date of B	irth:	Age:	Gender:	Male] Female 🗌	FTM 🗌	MTF 🗌	Other
Student #	<u> </u>		Address:					
				Street A	Address		A,	partment/Unit #
	City				State		Zip Code	
Primary Phone:			Cell Pho	one:				
Emergency Contact Name and number:								
School At	ttending: _							Grade:
Annual Family Family Size: Income: Email Address:								
Race:								
Hispanic/Latino/a 🔲 Native American/American Indian 🗍 Other								
Parent/Guardian Information								
Name:								
Last		F	First		М.І.			
Parent/G	uardian Oc	cupation _						
Child curr	ently reside	es with:	- Father	Bo	th Parents	Othe	er:	
		n for my child's schoo I ULPBC uses the par	I to release atte		onduct records,			n League of Palm Beach n.

Youth Project Consent Form

Thank you for allowing your child to participate in the Project Ready NULITES program at the *Urban League of Palm Beach County, Inc.* Program participants, with the guidance of *Urban League of Palm Beach County, Inc.* staff, will explore their goals for the future and participate in activities to prepare them for college, work, and life. Your child will be involved in service learning projects within the community to further their preparedness. The program promotes progress in school and reduces behaviors which may hinder your child's successful growth and achievement.

Please initial the consent below:

<u>Consent to Participate in the Project Ready NULITES Program</u>, the undersigned, am the Parent or Guardian of the child named below who is to participate in programs provided by *Urban League of Palm Beach County, Inc.* during the current school year. I am aware that there are potential hazards and risks involved in some programs. I am allowing the child mentioned above to participate in all aspects of the program (including field trips and transportation) under the supervision of *Urban League of Palm Beach County, Inc.* staff. Agency staff will accompany off site activities. I agree to hold harmless and indemnify *Urban League of Palm Beach County, Inc.* its Board of Directors, and/or its employees, agents, or lessors from any and all claims by myself, my teen, my heirs, my family, or my assigns.

_____Yes____No

<u>Consent to Use Photographs</u> I give my consent to *Urban League of Palm Beach County, Inc.* to use videos and/or photographs of my teen for brochures, to display in photo albums, in advertisements, or for other publicity purposes. If my teen's photo is used, he/she/they will only be identified by first name.

____Yes____No

<u>Consent to Use Virtual Online Platforms</u> I give consent to the **Urban League of Palm Beach County, Inc**. to use virtual online platforms Zoom, Google, Khan Academy, Webex and others, to provide enrichment tutorials, workshops, academic engagements, and trainings for the youth participants in our Project Ready NULITES Program.

_____Yes____No

Child's Name

Parent or Guardian Signature OR Teen signature if 18 or over or emancipated Print Parent Name

Date

Contact Information:

Lorraine Desravines Director of Youth and Education Programs Urban League of Palm Beach County, Inc. 1700 North Australian Avenue Cell: 561-342-1004 Fax: 561-833-6050 Email: Idesravines@ulpbc.org