

2017 YOUTH LEADERSHIP DAY **PHOENIX COLLEGE** 1202 W. Thomas Rd. Phoenix, AZ 85013 8:00AM - 4:30PM

FIRST 70 APPLICANTS WILL RECEIVE A GIFT!

REGISTRATION INFORMATION

www.phxindcenter.org | 602-264-6768 | youthprograms@phxindcenter.org









FUTURE INSPIRED NATIVE AMERICAN LEADERS



2017 YOUTH LEADERSHIP DAY PHOENIX COLLEGE

REGISTRATION FORM

For office use only Date & Time received:

YOUTH LEADERSHIP DAY

Phoenix College – Phoenix, Arizona | Saturday, February 11, 2017

Our youth are our future leaders and we are strongly committed to their success. Each year the Phoenix Indian Center hosts a Youth Leadership Day, planned closely with local organizations, focusing on leadership, college and career readiness, substance abuse preventions, and cultural enrichment. This FREE conference is open to all self-identifying American Indian high school students from across the Phoenix-Mesa Metropolitan Area and surrounding communities. This year the Phoenix Indian Center is celebrating its 70th year anniversary and to commemorate this event, the first 70 applicants will receive a gift which will be presented at the conference.

Conference Goals:

- To establish youth's career goals,
- To understand and identify barriers to higher education and workforce,
- To have parent involvement in learning prevention strategies as well as developing youth's guided success strategies, and
- To provide youth the skills to achieve successful, healthy, and balanced lives focusing on the future.

This Leadership Day will feature many exciting events, including:

- Career exploration, college and job readiness preparation,
- Hands-on team building activities,
- Identify barriers to success and establish drug and alcohol prevention skills, and
- Cultural enrichment activities facilitated by American Indian speakers.

AGENDA

7:30 AM - 8:30 AMRegistration and Breakfast8:30 AM - 9:45 AMBlessing and Opening Ceremonies9:55 AM - 11:35 AMMorning Breakout Sessions11:45 AM - 12:00 PMGroup Photo12:00 PM - 1:00 PMLunch and College Fair1:10 PM - 2:50 PMAfternoon Breakout Sessions3:00 PM - 4:30 PMGeneral Session and Closing Ceremonies

Parents & Adults, please join us at the Parent Sessions to help support your student on their path to success!

STUDENT INFORMATION						
Student Name (First):	(Middle):		(Last):		Suffix (Jr., III):	
	Grade:			Birth Date (mm/dd/yyyy):		
🗆 Male 🗆 Female	🗆 Freshman 🗆 Soj	phomore 🛛 Junior	□ Senior			
Tribal Affiliation:				Graduation Date:		
					19 🗆 2018 🗆 2017	
High School:		School	District:			
Student Phone Number:		Student	Student Email:			
Physical Address:				Apt./Unit:		
City:		State:			Zip Code:	
			Arizona			



REGISTRATION FORM

· · · · · · · · · · · · · · · · · · ·	DIAN INFORMATION				
Parent/Guardian Name:					
Parent Phone Number:	Parent Email:				
Parent Sessions:					
□ Yes, I plan to attend the Parent Workshop	⊐ No, I will not be able to attend the F	arent Workshop			
MEDICAL INFORMATION					
Insurance Carrier (if any):	Insurance Number (if any):				
Allergies (including food and medication):					
Medications:					
Special Health Conditions:					
TRANSPORTATION & C	CHAPERONE INFORMATION				
Please indicate which method of transportation your child will be taking to and from th					
School Bus D Public Transportation	□ I will transport my child to/from the	event location			
Chaperone Name (if applicable):	1 7 .				
Chaperone Phone Number:	Chaperone Email:				
Parent Sessions:					
□ Yes, I plan to attend the Parent Workshop	⊐ No, I will not be able to attend the F	arent Workshop			
	IES & AGREEMENTS				
This Release, Indemnity, and Assumption of Risk statement co					
participation, observation, and travel between activities, asso	•	, , ,			
permission for my child to participate in the Youth Leadership Day. For my child, I agree to assume the risk of any events					
associated with my child's participation, observation, or other activities at the conference that may result in any harm, injury,					
illness, damage or loss to my child. I hereby release, waive, and hold harmless Phoenix Indian Center, or other organizations					
involved in the conference or any of these organizations agents, personnel or volunteers from any claims, liability, or					
responsibility for any such injury, illness, damage or loss. I understand the Youth Leadership Day and other activities associated					
with the Drug and Alcohol Prevention presentations are voluntary, and I agree to accept the responsibility for my child's					
personal safety and participation in such workshops. I consent to the provision of emergency medical treatment for my child to					
the extent the treatment is necessary in the medical opinion of the doctor rendering the treatment. If I have any concerns about					
my child's ability to participate in any event or activity associated with the Phoenix Indian Center, I agree to discuss my concerns					
with my child's physician before signing this form.					
Electronic Signature Option:					
By typing your name below you are consenting to use an electronic signature to submit this registration form and indicate that					
you are consenting your child to participate in the 2017 Youth Leadership Day at Phoenix College.					
	dian Printed Name:	Date:			



REGISTRATION FORM

CAREER CLUSTER SURVEY

Please rank from 1 through 4 which career cluster interests you; 1 being your first pick and 4 being your last:			
#	Career Cluster		
	Arts/Communication: Journalism, Music, Dance, Theatre, Culinary, Visual, Broadcasting, Media		
	Business/Vocational: Finance, Marketing, Hospitality, Apprenticeship, Automotive, Welding, Agriculture		
	STEM/Manufacturing: Science, Technology, Engineering, Mathematics, Architecture, Design, Construction		
	Human Services: Public Safety, Health Care, Social Services, Law, Government, Education		

PHOENIX INDIAN CENTER, INC.

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PHOTO/VIDEO/AUDIO/WRITTEN INFORMATION RELEASE

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I further agree that PHOENIX INDIAN CENTER, INC. may use or cause to be used, these items for any and all exhibitions, public display, publications, commercial art and advertising purposes without limitation or reservation or any fee.

	STUDENT INFORMATION	
Student Signature:	Student Printed Name:	Date:
Address:	Apt./Ur	iit:
City:	State: Arizona	Zip Code:
Student Phone Number:	Student Email:	· · · · · · · · · · · · · · · · · · ·
lf p	erson signing is a minor, legal guardian must sign PARENT/GUARDIAN INFORMATION	i below:
Parent/Guardian Signature:	Parent/Guardian Printed Name:	Date:
Address:	Apt./Ur	nit:
City:	State: Arizona	Zip Code:
Parent Phone Number:	Parent Email:	
Check here to receive o	our e-newsletter with information about upcoming ev	vents.
For handwritten applications please re		SUBMIT FORM

4520 North Central Avenue, Suite 250 Phoenix, Arizona 85012

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