



Empowering Young Voices, Inc. (EYV) YOUTH MEMBER APPLICATION

Please write clearly and answer every question.

Date: _____

Name:

How do you identify yourself? (Male, Female, etc.) _____

Age: _____ Birthday: _____ Ethnicity: _____

Grade: _____ School: _____

Name of Parent(s)/Guardian(s): _____

City Residing In: _____ Zip Code: _____

Parent's Email Address: _____

Home Phone Number: _____

Parent's Mobile Phone Number(s):

Your Mobile Phone Number(s):

Your Email Address: _____

Did you have a Peer Mentor before through our program? Yes or No

If yes, would you like the same Peer Mentor this time? Yes or No

How did you hear about EYV? (Mark All That Apply)

Friend --- Teacher --- After School Program ---- Table @ Lunch --- World Star Hip Hop --- OTHER*

(*Please specify "OTHER" _____)

Why do you want to be an EYV Youth Member? (For tutoring, career planning, advice, mentorship, "big brother/big sister," to learn about college life, hang out with other young people. Or...ALL OF THE ABOVE!)

What are three (3) words that would best describe you?

Please describe three (3) things that you are good at:

Is there anything that you would change about yourself?

What clubs, activities, or sports are you in now? How much of your time do these activities take up?

What kind of activities, programs, etc. would you like to do with EYV?

Is there anything else that you would like to share that may help us make your membership AMAZING!??

Ok, almost done!

We just need your parent(s)/guardian(s) Liability & Media Release info below...

PARENT/GUARDIAN LIABILITY & MEDIA RELEASE FORM

I, _____, give my consent for EYV to provide life skills, leadership, entrepreneurial, and/or education support training to my child;

_____. In consideration of the advantages of participation with EYV, the undersigned agrees that EYV, its agents, and its staff shall be released and exempt from any liability for damages, bodily injuries, or property damages that may occur as a result of participation in EYV, **except to the extent of insurance liability as provided by law.**

Further, I, _____, grant permission to EYV, to use my child's image (photographs and/or video) for use in Media publications including, but not limited to: Videos, Email Blasts, Recruiting Brochures, Newsletters, Websites, and/or Social Media Platforms. I understand that EYV reserves the right to notify (or not to notify) parents/guardians of the use of photographs and/or video to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future. **Knowing this, I waive any right to royalties or other compensation arising from or related to the use of the image unless specific agreements have been made between EYV administration and respective parent/guardian prior to signing this release.**

Signature: _____ Date _____

Print Name: _____ Relationship to Child: _____

Emergency Contact and Phone(s)

FOR COMPLETE INFORMATION ON OUR PROGRAMS & SERVICES, VISIT OUR WEBSITE:
www.empoweringyoungvoices.com