



# APPLICATION

August 9, 2013  
*Be the Difference*

**Applications due NO LATER THAN Friday, July 26, 2013**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Student's Cell: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

School: \_\_\_\_\_ Email: \_\_\_\_\_

### Workshop Schedule Options: (Choose your 4 top favorites)

Imagine That OR

Game Time

Music Messages OR

Gang Life

A Different World OR

What's Your Dream

Let's Talk About Sex OR

Express Yourself

9<sup>th</sup> – 12<sup>th</sup> grade only

Decisions, Decisions OR

Music Messages

6<sup>th</sup> – 8<sup>th</sup> grade only

### PARENT/GUARDIAN DISCLAIMER

I, \_\_\_\_\_, as parent/guardian, do hereby release the City of Spartanburg and Converse College from any inquiry or damage that my child may sustain while my child attends the Youth Leadership Summit, including any and all injuries that may be sustained at the daily arrival or at the daily dismissal at the Youth Leadership Summit. I further agree to indemnify and hold harmless the City of Spartanburg and Converse College from any loss, liability, damage or costs, demands, actions, judgments, or actions of any kind, including court costs and attorneys fees, that are incurred due to my child's participation in the Youth Leadership Summit and related activities.

\_\_\_\_\_  
Parent/Guardian Name (please print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

#### For More Information Contact:

Lauren Rogers at 562.4199

Or [lrogers@cityofspartanburg.org](mailto:lrogers@cityofspartanburg.org)

#### Mail Forms To:

Lauren Rogers, Spartanburg Youth Council

PO Box 1749

Spartanburg, SC 29304

**Forms May Be Faxed To: 562-4190**