

DUPONT HIGH SCHOOL TEEN LEAGUE

Our mission is to serve as leaders in the DuPont community through public service and volunteering.

Sponsored by DuPont Parks and Recreation, the DuPont High School Teen League is an alliance of high school students from the DuPont area (of all high school options: public, private, homeschool, and correspondence) formed to provide teens voice and combined purpose through civic leadership, volunteer and social opportunities.

APPLICATION PACKET

COVER SHEET

Cover sheet is to remain attached to protect privacy of applicant information!

Any sensitive privacy information provided will be used solely for the administration of the DuPont High School Teen League program and will not be shared outside of the program without applicant's written consent or as agreed to herein.

When changes to this application packet become apparent, applicant/guardian will provide an update to the City of DuPont Parks and Recreation, 1700 Civic Drive, DuPont, WA 98327.

All items must be completed and returned to City Hall. Please be sure that ALL items below are included in your packet. Applicant name and date in the footer of each page ensures proper identification should pages separate.

Complete Application (Section 1-2 and 5)

Signed Code of Conduct (Section 6)

Completed and Signed Parent/Guardian Consent and Parental Volunteer Info. (Section 3-4)

All new members will be notified by e-mail as to acceptance, meeting times and locations.

Please contact us with any questions regarding the application packet:

DuPont Parks and Recreation Agency / DuPont High School Teen League – Volunteer Advisor:
Renee Buck, rbuck.dupontpra@gmail.com

DuPont Parks and Recreation Department Staff – Recreation and Events Coordinator
Amy Walker, parksandrec@dupontwa.gov

APPLICANT NAME: _____ **DATE:** _____

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SECTION 1: APPLICANT INFORMATION

Applicant name: _____
Last First MI

Year in High School: (Circle current) 9th 10th 11th 12th

School Attending: _____

Age: _____ Birth Month/Day: _____ Gender: Male ___ Female ___

Shirt Size (Adult) S ___ M ___ L ___ XL ___ XXL ___

Home Address: _____

Home Phone: _____ Cell Phone: _____ Text OK: Yes ___; No ___

Allergies/sensitivities or special accessibility needs:

_____.

SECTION 2: PARENTS OR LEGAL GUARDIAN INFORMATION

Mother/Legal Guardian:

Name: _____ Place of Work: _____

Cell Phone: _____ E-mail address: _____

Evening Phone: _____ Daytime Phone: _____

Address: _____

Father/Legal Guardian:

Name: _____ Place of Work: _____

Cell Phone: _____ E-mail address: _____

Evening Phone: _____ Daytime Phone: _____

Address: _____

Parent or legal guardian contact notes:

_____.

APPLICANT NAME: _____ DATE: _____

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SECTION 3: PARENTAL VOLUNTEER OPPORTUNITY

_____ I am willing to assist in providing snacks and drinks for meetings.

_____ Yes, I am available to help.

_____ No, I am not available to help.

Summary of skills, knowledge, abilities, talents, time and experience I am able to volunteer in support the DuPont High School Teen League:

SECTION 4: DUPONT HIGH SCHOOL TEEN LEAGUE CONSENT TO PARTICIPATE

I _____, hereby give my consent
for _____ to participate on the DuPont High School
Teen League meetings, activities and field trips.

Parent/Guardian Permission/Medical Consent

Parents/Guardians of all participants are requested to sign the following release. I/We assume all risks and hazards incidental to such participation including transportation to and from the activities and do hereby waive, release, absolve, indemnify and agree to hold harmless the City of DuPont, Steilacoom School District, sponsors, supervisors, chaperones, volunteers and persons transporting myself or my/our child for any claim arising from injury to myself or my/our child. Furthermore, in case of an emergency in which my child should require medical attention, I give permission for staff, or volunteer designee, to secure the emergency medical attention required. Any direction to the contrary should be noted and signed. I agree that pictures taken during program hours may be used for future promotional purposes.

Transportation to and from events will be the responsibility of the parent or guardian, unless other carpool arrangements have been made.

X _____

Participants' Signature (*or guardian if a minor*)

.....
APPLICANT NAME: _____ **DATE:** _____

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SECTION 5: GETTING TO KNOW YOU

1. Briefly describe why you want to be part of the DuPont High School Teen League.
2. What would you like to see the DuPont High School Teen League accomplish in the upcoming year?
3. List extracurricular activities associated with your school or other organizations you are involved in:
4. Choose three words that best describe you and why:
5. Have you been involved in any youth programs in the past? If so, please list:

SECTION 6: DUPONT HIGH SCHOOL TEEN LEAGUE CODE OF CONDUCT

To ensure that the DuPont High School Teen League is a positive and enjoyable experience for all participants, I agree to this code of conduct which will be enforced for all participants. Please read and sign below to acknowledge agreement.

As a member of the DuPont High School Teen League, I will uphold the following conduct and behavior standards:

1. I will be courteous and respectful towards others. I will listen to understand and speak to be understood.
2. I agree to value and respect others' ideas regardless of whether they are the same as my own.
3. I will actively participate in community activities and events put on by the DuPont High School Teen League.
4. I will conduct myself in a respectful manner always.
5. I will dress appropriately always. Revealing clothing or apparel featuring alcohol, tobacco, drugs or disrespectful messaging is prohibited.

Participants Signature

APPLICANT NAME: _____ **DATE:** _____

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CONTINUATION PAGE: (Use for continuation of SECTION 5, other sections, or remarks as needed.)

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APPLICANT NAME: _____ **DATE:** _____