



14th Annual Youth Leadership Morgan Hill

Activity Code #: SSV005

YLMH is a 5-day program for teens 13 – 18 years old interested in learning and improving leadership skills or being part of the Youth Action Council (YAC) for the new fiscal year October 2019 – May 2020. This program gives teens a sense of empowerment and a chance to serve and contribute to their community. Additionally, this program builds bonds between teens, current community officials, and business leaders. The workshops will be presented by youth leaders, city officials, local business owners, and inspirational community members.

Applications can be found at the Centennial Recreation Center (CRC) Teen Center and Welcome Desk, and the Community and Cultural Center Welcome Desk. Scholarships are available and will be attached to the Registration packet. Special YLMH Scholarship application needs to be submitted at the Centennial Recreation Center, attention to Chiquy Mejia. Register early as this program does fill! Maximum 30 participants.

<u>Date</u>	<u>Time</u>	<u>Location</u>
Monday	7/22 8:30am-3:30pm	CCC
Tuesday	7/23 8:30am-3:30pm	CCC & 6:00pm-8:00pm YAC Applicants & Parents Orientation Meeting*
Wednesday	7/24 8:30am-3:30pm	CRC
Thursday	7/25 8:30am-12:30pm	CRC & 1:30pm YAC Interviews*
Friday	7/26 8:30am – 2:30pm	Anaerobe Systems - Graduation Lunch

*Only for YLMH students who applied to serve with YAC

Resident: \$60 / CRC Member: \$55

Non-Resident: \$65 / CRC Member: \$60

Sponsored by:



For more information contact the Centennial Recreation Center at 408.782.2128

Parents please keep this

Registration Form 2019

Activity Code #: SSV005



Student Information

Please write legibly in either blue or black ink.

Participant's Complete First Name: _____ Last Name: _____

Nick Name – Optional: _____ Cell Phone: _____

Student Email Address: _____

Name of School: _____

Grade: _____ Age: _____ Birth Date: _____ Gender: _____

Home Address: _____ City: _____ Zip: _____

How did you find out about this program? _____

Are you a vegetarian? Yes No Participant's shirt size: _____

*Participants who are vegan or have a special diet will need to bring their own lunch and/or snacks.

PARENT/ LEGAL GUARDIAN INFORMATION

Parent's Complete First Name: _____ Last Name: _____

Cell Phone #: _____ Email: _____

Please turn in this application form along with the Emergency/Allergies and Community Solutions Forms, and register at the Morgan Hill Centennial Recreation Center (CRC), Aquatics Center (AC) or Community and Cultural Center Welcome Desks. Space is limited to 30 students. Scholarship/Financial Assistance is available; please contact Chiquy Mejia at 408.310.4253 for more information.

Student's Signature: _____ Parent's Signature: _____ Date: _____

BUILDING DEVELOPMENTAL ASSETS ONE TEEN AT A TIME!

CITY OF MORGAN HILL AND YMCA OF SILICON VALLEY: RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA and City of Morgan Hill (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in recreation programs including classes where the participants supply their own equipment, or participation in any off-site program affiliated with the YMCA or City of Morgan Hill, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA or City of Morgan Hill for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment, including equipment supplied by the participant, thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA AND CITY OF MORGAN HILL FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE RECREATION PROGRAM AFFILIATED WITH THE YMCA OR CITY OF MORGAN HILL, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, AND DISCHARGES the YMCA, its directors, officers, employees, and agents, and City of Morgan Hill elected officials, officers, employees, agents and representatives(hereinafter referred to as "releases") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment, including equipment supplied by the participant, therein or participating in any program affiliated with the YMCA or City of Morgan Hill.
2. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY CONVENANTS NOT TO SUE either the YMCA, its directors, officers, employees, and agents, or City of Morgan Hill elected officials, officers, employees, agents and representatives(hereinafter referred to as "releases") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment, including equipment supplied by the participant, therein or participating in any program affiliated with the YMCA or City of Morgan Hill.
3. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the YMCA or City of Morgan Hill premises or in any way observing or using any facilities or equipment, including equipment supplied by the participant, of the YMCA or City of Morgan Hill or participating in any program affiliated with the YMCA and City of Morgan Hill whether caused by the negligence of the releases or otherwise.
4. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releases or otherwise while in, about or upon the premises of the YMCA or City of Morgan Hill and/or while using the premises or any facilities or equipment, including equipment supplied by the participant, thereon or participating in any program affiliated with the YMCA or City of Morgan Hill.
5. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY consents to and authorizes the use and reproduction of any and all photographs and video which have been taken of the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for the promotional purposes of the YMCA and City of Morgan Hill, or anyone authorized by the YMCA or City of Morgan Hill. The undersigned understands that no reimbursement will be given for allowing the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin's photo or video to be taken and the use of the photo or video.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made. **I HAVE READ THIS RELEASE.**

Signature of Participant

Print Name

Date

Signature of Legal Guardian/Parent

Print Name

Date

Emergency/Medical Release & Allergy Information Form



Participant's Name _____ Date of Birth ____ / ____ / ____ Age _____

Home Address _____

Legal Guardian/Parent's Name _____ Cell Phone _____

Alternative Emergency Information

Name	Cell Phone	Relationship
_____	_____	_____
_____	_____	_____

Any allergies or medical conditions? _____

If yes, please explain: _____

Signature of Participant _____ Print Name _____ Date _____

Signature of Legal Guardian/Parent _____ Print Name _____ Date _____





Financial Assistance Application
Aplicación para Ayuda Financiera
Summer 2019



Please complete this application and return it the registration packet to the CRC Welcome Desk. Attention to Chiquy Mejía
 Español- Por favor, complete y entregarla esta solicitud con el paquete de registración en la área Administrativa del CRC. Atención a Chiquy Mejía.

CONTACT INFORMATION	
Nombre del Representante: Parent's Complete Name:	Teléfono de Casa: Home Phone:
Padre/Madre/ Guardián: Parent(s)/Guardian:	Teléfono Celular: Cell Phone:
Dirección de domicilio: Mailing Adress:	Correo Electrónico: E-Mail Address:

Nombre del Participante Participant's Name	Edad Age	Fecha de Nacimiento Date of Birth	¿Cuánto cree usted podría pagar para registrar a su hijo(a) en este programa? How much do you feel you could pay towards the program?
			\$
			\$
			\$

Are you currently a CRC Member? ¿Es usted actualmente un miembro del CRC? Yes _____ No _____

Please, briefly explain why you need financial assistant?
¿Por favor, explique brevemente por qué necesita asistencia financiera?

Parent's Signature/Firma del Padre/Madre: _____ Date/Fecha: _____

For Office Use Only/Para Uso Oficial Solamente

Approved: YES _____ NO _____ Notification Date: _____