

YOUTH & GOVERNMENT™

We build strong kids, strong families, strong communities.

ADVISOR REGISTRATION FORM

Delegation: _____

Advisor's Name _____ Phone (____) _____

Address

_____ Street _____ City _____ State _____ Zip

Email Address: _____

Are you a: Volunteer YMCA Staff

We would like to know you better, so tell us about yourself. _____

Please register me for the Indiana YMCA Youth & Government program. I understand that I must attend all scheduled meetings and activities of the YMCA delegation. I also understand that the \$25 deposit, returned with this registration form, is non-refundable, but will be applied toward my program fee of \$100. I also understand that I am responsible for hotel and transportation costs. (Fundraising is one way to offset the cost of this program.)

Advisor's Signature

Date

Advisor's will also need to submit a 2005 Emergency Form.

Indiana YMCA Youth & Government
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Indianapolis, IN 46204
(317) 266-9622 * Fax: (317) 266-2845
www.indymca.org

YMCA mission: To put Christian principles into practice through programs that enhance personal growth and improve health of spirit, mind, and body for all.