

# 2025 CHELCO Youth Tour Application

Please print legibly

Student Name: \_\_\_\_\_ T-shirt size: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_  
High School: \_\_\_\_\_ School contact: \_\_\_\_\_  
School contact phone #: \_\_\_\_\_ School contact email: \_\_\_\_\_  
Name you wish to be called: \_\_\_\_\_ Contact preference: Call \_\_\_ Text \_\_\_ E-mail \_\_\_  
**Student** cell Phone: \_\_\_\_\_ Student E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
Parent or Guardian(s): \_\_\_\_\_ **Parent** Contact Cell phone: \_\_\_\_\_

Major study interest: \_\_\_\_\_

School Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Community Activities (church, Volunteer, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies/Extra Curricular Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awards/Accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

About you (Family or anything you think is interesting): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHELCO Youth Tour**

**Parental Consent and Publicity Release Form**

I/We the parent(s) or guardian(s) of \_\_\_\_\_ give my/our consent for him/her to participate in the CHELCO Youth Tour trip to Tallahassee, Florida, February 12-13, 2025.

I/We authorize and direct CHELCO through the cooperative staff and/or employee chaperones to direct and supervise my/our son/daughter. We further request and authorize CHELCO through the cooperative staff and/or employee chaperones to secure any medical or other emergency services deemed necessary or desirable for my/our son/daughter during his/her participation in the Youth Tour trip to Tallahassee.

I/We hereby release and agree to hold harmless CHELCO, their officers, members, staffs and associated organizations together with their heirs, successors, or assigns from any and all causes of action, claims, damages, costs, expenses, compensation, personal injury, property loss or any other loss or injury related to participation by my/our son/daughter during his/her participation in the CHELCO Youth Tour program.

I/We hereby grant permission to CHELCO to use photographs, likenesses and/or videotaped images of my/our son/daughter for publicity purposes related to this activity.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

(Parent or Guardian)