



LTBB EDUCATION DEPARTMENT YOUTH REGISTRATION FORM FALL 2014

Please fill-out the box portion of this registration form completely!

Name: _____	Parent/Guardian: _____
Address: _____	Work Phone: _____
City: _____	Emergency Contact: _____
State: _____	Relationship to child: _____
Zip: _____	Emergency Contact Phone: _____
Age/DOB: _____	Please list all authorized adults who may pick-up your child: _____
Parent Email: _____	_____
Cellphone Number: _____	_____
Can we contact or communicate through text messages? _____	

Below are the functions/activities that may be offered by the LTBB Education Department Program. Review the list and indicate in the box provided “yes” or “no” that you give permission for your child to participate.

Yes	No	Functions / Activities and Description
<input type="checkbox"/>	<input type="checkbox"/>	Canoeing, fishing, harvesting (using sharp knives)
<input type="checkbox"/>	<input type="checkbox"/>	Parching wild rice (students will be around a fire, and handling utensils)
<input type="checkbox"/>	<input type="checkbox"/>	Moccasin/basket making (using needles, sharp knives)
<input type="checkbox"/>	<input type="checkbox"/>	Cooking wild rice & fish (using sharp utensils such as knives, using high temperature cookware)

Are there specific cultural practices (ex. Dancing, singing, beading) that you would like your child to learn?

What other activities does your child like to participate in?

We have a parent component to the program. Are you willing to volunteer once or twice a year to help with events, share a talent or knowledge, chaperon on field trips, or participate on the advisory committee?

Is there anything else about your child you would like to comment on?

Tribal preference will apply. Please check all that apply:

- LTBB Enrolled: Enrollment #
- Other Tribal Nation: Enrollment #
- 1st Generation: Parent is LTBB Enrolled Member, but child is not
- No Tribal Affiliation, but have LTBB Family Members
- Other; Please explain

Transportation: Please check one of the following boxes:

Please check if you need a ride from Petoskey Middle School (pick-up at 3:15) to Harbor Springs Shay Elementary. **There will be no transportation available after program, parents are responsible for student pickup at Shay Elementary (see flyer for times).**

Permissions: Please initial the following:

- _____ I give my child permission to ride in a Government Vehicle
- _____ I give my child permission to ride in a school bus

By signing this registration form I am authorizing my child's participation in all functions/activities in LTBB Education Department Program as indicated on this form.

Signature: _____ Date: _____

Printed Name: _____

Child's Name: _____

Other Forms that must be completed in order for registration to be complete:

- Medical Release
- Waiver of Liability
- Media Release
- Behavior Expectation Contract