



**Ignacio Youth Services**

**Southern Colorado Community Action Agency, SoCoCAA.**

**2020-2021 Program Registration Form**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

School Name: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Grade level in fall 2020: \_\_\_\_\_

Mark All That You Identify With: Southern Ute \_\_\_ White \_\_\_ Black \_\_\_ Other Native \_\_\_ Asian \_\_\_  
Ethnicity: Hispanic Y / N

Tribal Affiliation (if applicable) \_\_\_\_\_

Phone Numbers to Reach Participant: Home Phone: \_\_\_\_\_

Student Cell: \_\_\_\_\_

Home Address (primary residence): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address (please provide): \_\_\_\_\_

Preferred Method of Communication: Texts: \_\_\_\_\_ Email: \_\_\_\_\_ Phone Call: \_\_\_\_\_

Please Note Any Severe Allergies: \_\_\_\_\_ Epinephrine Pen: Y/N

\*\*\* We encourage you to find us on Facebook. "SoCoCAA Youths".\*\*\*

We post photos from activities, post upcoming events and is a great way to communicate with us!

Parent/Guardian Name(s): \_\_\_\_\_

Parent/Guardian Cell: \_\_\_\_\_

Parent/Guardian Work Phone: \_\_\_\_\_

Emergency Contact (other than parent/guardian): Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**REGISTRATION INFORMATION**

SoCoCAA Youth Services has a limited number of spaces available for every “off campus” event. Participants will be accepted on a first come first serve basis in the order in which their paperwork is received. A waiting list will be created for those youth interested in registering after the maximum quota is filled.

Individual event permission forms are required for all programs occurring outside of Ignacio.

**Photography**

Video and photographs will be taken during events; and will be shared on public forums and used for promotional purposes.

**Policies and Procedures**

For all events occurring on Ignacio School District grounds the program will adhere to all district school-day and after-school policies. Events occurring off of school grounds will adhere to SoCoCAA Youth Services policies and procedures. SoCoCAA Youth Services Policies and Procedures are available at the SoCoCAA Administration building at 535 Candelaria, or at the ELHI Community Center Rooms 13, 14, 15.

**Release of Information**

I (the undersigned) give my permission for the school/educational institution named above to release grades, transcripts, test scores, pertinent behavioral information, medical information, and any other relevant information to SoCoCAA Youth Services. I understand that the information will be held strictly confidential.

By signing this registration packet I give the student named above permission to attend SoCoCAA Youth Services events. I agree that all information provided above and below is correct and complete.

Signing below states that I have reviewed, understood, and accepted all information provided in this registration packet. Furthermore, I agree to not hold the Southern Colorado Community Action Agency liable for any injuries or theft of personal belongings that occur during SoCoCAA events.

Parent/Guardian Signature (or participant if 18 years old):

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

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