the Chickasaw Nation

Bill Anoatubby
Governor

Education Division
300 Rosedale Road / Ada, OK 74820 / Phone: (580) 421-7711
Email: NYCPPROGRAM@chickasaw.net

Native Youth Community Project (NYCP)
Grades 1-12

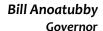To complete this application, you must attach copies of the following:
   *Tribal citizenship card (CDIB accepted, if a member of other tribal affiliation)
   *Most recent report card
   *Signed parental consent and participant code of conduct forms
****

Participant from: ☐ Pontotoc County   ☐ Carter County

Participant's name: _____
First   Middle   Last   Suffix

Address: _____
Street   City   State   County   ZIP

Home phone: (_____)_____   Cell phone: (_____)_____

Birth date: ___ / ___ / ____   Age: _____   (Check one)
Sex: ☐ Male   ☐ Female

T-shirt size: _____   Tribal affiliation: _____

School: _____   Grade entering: _____

Does the student have an IEP? ☐ Yes   ☐ No

Parent/legal guardian name: _____
First   Middle   Last   Suffix

Parent/legal guardian email address: _____   Birth date: _____
(for security purposes)

Parent/legal guardian work phone: (_____)_____   Cell phone: (_____)_____

Relationship to child: _____

Emergency contact: _____   Phone number: _____

Return applications via email to NYCPPROGRAM@chickasaw.net or mail to: Chickasaw Nation
Native Youth Community Project, 300 Rosedale Road, Ada, Oklahoma 74820 or call 580-421-7711.

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PARENTAL CONSENT

Please complete if participant is a minor

INCOMPLETE APPLICATION CANNOT BE PROCESSED

Please return this information to the Chickasaw Nation Native Youth Community Project, 300 Rosedale Road, Ada, Oklahoma 74820. (PLEASE PRINT)

Participant's name: _____

First   Middle   Last   Suffix

Participant's address: _____

Street   City   State   ZIP

Parent/legal guardian: _____

First   Middle   Last   Suffix

Parent/legal guardian birth date: _____ Cell phone: _____

(for security purposes)

I believe that my child is physically and mentally capable of participating in the programs offered by the Chickasaw Nation Education Division. Furthermore, I agree to indemnify and hold harmless the Chickasaw Nation, its employees and all personnel (including consultants) participating in or associated in any manner with these services from any claims of damages, liabilities, injury, expense or loss occurring from activities or travel associated with the education division programs.

In case of accident or need for emergency medical attention, I give permission to program staff to take my child to a doctor and/or emergency facility of the Chickasaw Nation's choice. It is understood that all expenses for treatment provided will be borne by the parent, guardian or child.

Please list all medication(s) your child is currently taking (dosage and schedule) and list of child's allergies:

_____

_____

Please list any over-the-counter medications that you give us permission to give to your child (Example: Tylenol, Motrin, Pepto-Bismol, etc.):

_____

Furthermore, I give my permission for my child to travel with program staff and other participants to and from NYCP official events. I also give permission for program staff to access my child's grades and attendance from their school. I give permission for my child to engage in supportive counseling as indicated.

My permission is granted to the Chickasaw Nation, its agents or employees to photograph, record, film and videotape my child for future promotion of the education division programs and/or any Chickasaw Nation publications. I shall have no right of approval, no claim to additional compensation and no claim (including without limitation, claims based upon invasion of privacy, defamation or right of publicity) arising out of any uses, alteration, distortion or illusionary effect or use in any composite form.

I understand that the Chickasaw Nation is a sovereign entity and that the Chickasaw Nation does not waive any sovereign rights by offering and hosting these services.

_____   _____

Parent or legal guardian signature (if participant is a minor)   Date

Native Youth Community Project
Grades 1-12

<u>PARTICIPANT CODE OF CONDUCT</u>

Please return this information to:
Native Youth Community Project
300 Rosedale Road
Ada, OK 74820

One of the primary goals of the Chickasaw Nation Native Youth Community Project is to provide a safe environment conducive to learning. Participants are expected to adhere to the Participant Code of Conduct while attending the meetings. Participants' behavior is expected to be cooperative with all the instructors as well as staff members, since all participants are under the supervision of the adults helping with this event.

The use of tobacco, alcohol or drugs in any form will not be allowed. Use of foul or abusive language, excessive horseplay, theft, misuse or abuse of public or private property or disrespect of other participants or staff members will not be tolerated. Violators are subject to being sent home. If violations of the code of conduct are deemed by the staff members to be less serious, the punishment will result in a reprimand and further violations may result in participants being sent home.

Realizing these guidelines are not "all inclusive," the Chickasaw Nation reserves the right to make adjustments to the code of conduct.

The reason for this agreement is to ensure conduct and behavior that will result in every participant receiving the full benefit of enjoyment and educational experiences from this event. It is not intended to place undue restrictions upon any individual.

_____   _____   _____
Participant's printed name   Participant's signature   Date

_____   _____   _____
Parent or legal guardian printed name   Parent or legal guardian signature   Date
(if participant is a minor)

_____
Parent or legal guardian phone number

<u>Emergency Contact Information</u>

_____   _____
Name of contact   Phone number

Relationship to child: _____