

# Student Information

Please print or type.

**You will not be eligible to participate in Youth Tour activities until these forms have been filled out in their entirety and returned to your sponsoring cooperative for submission to PREA.**

PREA and NRECA collect the information contained in this form to provide or arrange first aid and other medical treatments for participating students of Youth Tour and the Youth Leadership Council. We reserve the right to refuse participation to your child in the event the information is not provided. The information collected will be kept by PREA and NRECA staff and made available to medical staff in the case of an accident or emergency. This information is not shared for any other purpose. Some of the information contained in the form will be deemed a personal health record and therefore will be protected in accordance with certain federal requirements in addition to PREA and NRECA's privacy policy.

Electric Cooperative: \_\_\_\_\_

Full Name: \_\_\_\_\_

Name (as you want it to appear on your name badge): \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Your Email Address: \_\_\_\_\_

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Congressional Representative: \_\_\_\_\_

Parent(s)/Guardian(s) – List the *full names* of your natural parents, step-parents, and/or legal guardians:

Parent 1: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent 2: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent 3: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent 4: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Legal Guardian(s): \_\_\_\_\_ Cellphone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

With whom do you live? \_\_\_\_\_

# School Information

High School: \_\_\_\_\_

School Address: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Major Study Interest: \_\_\_\_\_

Career Goal: \_\_\_\_\_

List activities you have participated in and any special honors you have received during high school, such as class officer, plays, music, athletics, etc.:

Activity	Years	Remarks

Please list any public speaking experience you may have: \_\_\_\_\_

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List extracurricular activities and years of involvement, including 4-H, church, community and service clubs, etc.:

Activity	Years	Remarks

List any other activities, special interest or hobbies: \_\_\_\_\_

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List your local newspapers, dailies and weeklies, names, addresses and websites: \_\_\_\_\_

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