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# Scotts Valley Band of Pomo Indians

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## Youth Activities Incentive Sign-up Form

### Alcohol and Drug Prevention Program

*Working for a drug-free community*

#### **Personal Information:**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

#### **Previous Youth Activity Information:**

Has child participated in any other youth activity this year? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when? \_\_\_\_\_

where? \_\_\_\_\_

what? \_\_\_\_\_

#### **Current Requested Youth Activity Information:**

Activity (ie: baseball etc): \_\_\_\_\_ Start Date: \_\_\_\_\_

Organization's Name: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Any Additional Information: \_\_\_\_\_

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**REQUIRED:** A flier for the requested activity **MUST** be attached to this form.

#### **Youth Activity Expenses:**

Registration Costs: \$ \_\_\_\_\_ Shoes: \$ \_\_\_\_\_

If parent has paid for activity costs, proof of payment is required to be submitted with this form.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_