



STATEMENT OF ACKNOWLEDGMENT/AGREEMENT

I,....., am aware of the commitment and requirements for **JUNIOR LEADERSHIP MANATEE**. I understand I am REQUIRED TO ATTEND THE ORIENTATION (no exceptions!) and that I am committed to attend EVERY program day. Early excuse from a day program for unanticipated, emergency reasons may only take place by a call to the Program Facilitator, followed up with a written note from a parent or teacher to the Facilitator of the specific program day.

I have reviewed the 2017-2018 **JUNIOR LEADERSHIP MANATEE** program dates and will attend all sessions.

If I miss more than one program day, I understand that I will be unable to continue with the **JUNIOR LEADERSHIP MANATEE** program. If an emergency should occur, the **JUNIOR LEADERSHIP MANATEE** Board would meet and decide whether a student missing a program day would be allowed to continue in the program.

If I miss a program day because of illness or emergency, I will call the **JUNIOR LEADERSHIP MANATEE** Program Day Facilitator for the specific day I am missing. As a matter of courtesy, I will call prior to the program day's start so as not to cause any delays or confusion in the day for others. (Note: The name and phone # of the Program Day Facilitator is always listed on the agenda.) If I miss a program day, I also understand that it is my responsibility to access the **JUNIOR LEADERSHIP MANATEE** website and print out the agenda for the next program day in order to insure that I am at the next program day at the correct time and place. (The agenda for the upcoming program day is always posted on the **JUNIOR LEADERSHIP MANATEE** website at least 2 weeks prior to each program.)

Student Cell Phone Number _____

Signature of participant _____

I, (parent/guardian)_____, am aware of the commitment my son/daughter has made for **JUNIOR LEADERSHIP MANATEE**. I understand the attendance requirement for this program and will support my son/daughter in attendance at all sessions; accompanied by the necessary call or letter of excuse should that be necessary. I also agree to receive all email communications from JLM that are sent to my son/daughter so I am kept completely up to date on all program day times, locations and agendas.

Signature of Parent/Guardian _____

Date _____

Parent/Guardian Email Address _____



_____ Health Form

_____ Release form completed and notarized

_____ Check for Participation (non-refundable) in the amount of \$150.00*, made payable to "**JUNIOR LEADERSHIP MANATEE**"

_____ **OR** I have requested information on Scholarships
(note: scholarship information will be forthcoming for those who requested)

RETURN ALL DOCUMENTS & CHECK BY SEPTEMBER 6, 2017

Return to:

JUNIOR LEADERSHIP MANATEE
PO Box 1491
Bradenton, FL 34206