

# **YOUTH POWER!**

## **YOUTH POWER! ART & WELLNESS EXPO AUGUST 28<sup>TH</sup>, 2017**

Email to: **AFrisina@youthpowerny.org** or Fax "ATTN: YP! EVENTS" to (631) 265-0762 by 8/25/17. For more information contact Alex Frisina at (631) 245-5289

**\*Youth under the age of 18 must have Guardian Permission**

<b>Name:</b>	<b>Title:</b>	
<b>Organization:</b>		
<b>Address:</b>		
Street	apt #	
City	State	Zip
<b>Phone:</b>	<b>Email:</b>	
<b>Emergency contact:</b>	<b>Relationship:</b>	
<b>Phone #:</b>	<b>Cell phone #:</b>	
Allergies and disability accommodations that presenters should know about:		

### **Media Release Form (optional)**

I, \_\_\_\_\_, (print your full name) hereby agree to appear in audio, video or print media for public relations, advertising, web development, commercial productions, documentaries, educational broadcast presentations, as well as any other forum to the benefit of YOUTH POWER! and Families Together in NYS.

I understand that YOUTH POWER! and Families Together in NYS will have ownership of all recorded materials and I agree that YOUTH POWER! and Families Together in NYS may use my image and voice in any manner. I understand and agree that YOUTH POWER! and Families Together in NYS has the right to reproduce and distribute these materials and that I will not receive any form of compensation.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's Signature (If under 18 yrs old): \_\_\_\_\_

Guardian's Printed Name \_\_\_\_\_ Date: \_\_\_\_\_

# **YOUTH POWER!**

## **Code of Conduct**

**I will help to create a youth peer community based on mutual respect and a sense of personal wellbeing. I will treat others with honor and respect because that is how I wish to be treated.**

**I have read the following rules, designed to promote the health and safety of all people attending the event. I have indicated my complete acceptance by my signing this form. If I am not a legal independent adult my parent/guardian has signed this form as well.**

- I am willfully attending this event and acknowledge that YP! does not allow young people to be forced to attend their events.
- I will attend and participate fully in the entire event.
- I will arrive on time, return from breaks on time and stay until the end.
- I will model respect.
- I will not participate in any activities that could be deemed as sexually harassing, demeaning, or hurtful.
- I agree to refrain from sexual behavior and public displays of affection while attending the YP! event.
- I will not bring or use any weapons, firearms, or anything that may be construed as a weapon.
- I will not possess, consume, or distribute any form of drug or alcoholic beverage.
- I will not commit any illegal act.
- I understand that I will have to pay for any damage that I cause.
- I understand that no gambling is allowed.
- I understand that no guests are allowed unless the YP! leadership grants permission in advance.
- I agree to abide by any additional rules, pertinent to a specific event, which may be announced, and to accept the consequences of their violation.

**I understand that these rules apply from the time I leave home for the event, during the event itself, and until I return home after the event.**

Young Person's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**I understand that part of the YP! experience involves empowerment activities that may be new to the young person. These things come with certain risks and uncertainties beyond what the young person may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of this young person. I realize that no environment is risk free and so I have instructed the young person on the importance of abiding by the YP! Code of Conduct. The young person and I both agree that he or she is familiar with these rules and will obey them. We understand that the young person must be willing to attend the event and that YP! will not make exceptions or tolerate force. We further understand that violation of the code and our force policy could include immediate expulsion from the event.**

Parent/Guardian's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_