

Southeastern Delaware County REGIONAL YOUTH POLICE ACADEMY CADET APPLICATION

This form **MUST** be completed in full and signed (in ink) on the following page in order for your child to participate. Incomplete applications will not be accepted. Applications are due by February 18, 2016. **Please return all applications to your Borough Municipal Building.**

TO BE COMPLETED BY PARENT/GUARDIAN:

FIRST NAME OF APPLICANT	MIDDLE NAME	LAST NAME	
STREET ADDRESS			
CITY		STATE	ZIP CODE
DATE OF BIRTH	CURRENT AGE	GRADE	GENDER
SCHOOL ATTENDED		SHIRT SIZE	YOUTH S M L XL 2XL 3XL ADULT
PARENT/GUARDIAN'S NAME	CELL PHONE NUMBER	EMAIL ADDRESS	
ADDITIONAL EMERGENCY CONTACT	CELL PHONE NUMBER	EMAIL ADDRESS	
ADDITIONAL CHILD(REN) WHO WILL BE ATTENDING (YOU MUST SUBMIT AN APPLICATION FOR EACH CHILD):			

TO BE COMPLETED BY APPLICANT:

TELL US BRIEFLY WHY YOU WANT TO ATTEND THE YOUTH POLICE ACADEMY:
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RECOMMENDATION BY AN ADULT WHO KNOWS THE APPLICANT IN AN OFFICIAL CAPACITY:

MY RELATIONSHIP TO THE APPLICANT (TEACHER, COACH, SCOUTMASTER, ETC):	NUMBER OF YEARS I HAVE KNOWN THE APPLICANT:
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AFTER REVIEWING THE REQUIREMENTS AND EXPECTATIONS FOR CADETS, I FEEL THAT THIS APPLICANT IS A GOOD CANDIDATE FOR THE REGIONAL YOUTH POLICE ACADEMY.

SIGNATURE
PRINTED NAME
DATE

PERMISSION OF PARENT OR GUARDIAN:

(Please Print) I, _____ am the Parent/Guardian of (Please Print Child's Full Name) _____ (hereinafter referred to as the CHILD).

I am over eighteen (18) years of age and reside at (Print Your Address) _____

I hereby give my permission and authorize my CHILD to participate in the Youth Police Academy, which may include classroom instruction, field trips, recreational events and physical activities. In consideration of my CHILD's opportunity to participate in the Youth Police Academy, I hereby release and forever discharge and shall hold harmless and indemnify the Aldan, Clifton Heights, East Lansdowne, Lansdowne and Yeadon Borough Police Departments, the Boroughs of Aldan, Clifton Heights, East Lansdowne, Lansdowne and Yeadon and their agents, servants and employees (collectively hereinafter referred to as the BOROUGH) from all actions, causes of actions, suits, debts, sums of money, accounts, damages, judgments, claims and demands whatsoever which I or my CHILD, or our heirs, executors, administrators, successors and assigns may have now or in the future against the BOROUGH which may arise out of my Child's participation in the Youth Police Academy including, but not limited to the aforementioned activities and any acts related thereto.

Parent / Guardian You MUST Sign Your Name in Ink on the Line Below (Application will not be accepted if not accompanied by Parent/Guardian signature)

Please sign in ink _____

Parent email _____

CERTIFICATION AND RELEASE OF INFORMATION AND PHOTO:

I certify that all statements made on this application are true to the best of my knowledge and are made in good faith. I understand that I may not be considered for the Youth Academy if it is found that the information on this application is false. I can supply information that will prove entries on this application are true. I understand that a strict code of conduct will be adhered to while attending the Southeastern Delaware County Regional Youth Police Academy.

I hereby authorize any representative of the Borough Police Department bearing this release to obtain information pertaining to my personal background including, but not limited to academic and athletic achievement, attendance, and any other records that may be requested by such employee.

This release is executed with the full knowledge and understanding that the information is for the official and confidential use of the Southeastern Delaware County Regional Youth Police Academy.

The undersigned give permission to the Regional Southeastern Delaware County Youth Police Academy for the use and display of his/her or their child's photograph in publications, displays, websites and advertisements.

The undersigned releases and forever discharges any and all claims and demands arising out of or in connection with the use of said photographs and images.

Parent/Guardian Signature _____

Applicant/Youth Signature _____

Date _____