



## Youth Demographics Sheet

### Participant Information:

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Gender:  Male  Female  Other
- Pronouns (if desired): \_\_\_\_\_
- Ethnicity: \_\_\_\_\_

### Contact Information:

- Address: \_\_\_\_\_
- City: \_\_\_\_\_
- State: \_\_\_\_\_
- ZIP Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

### Parent/Guardian Information:

- Parent/Guardian Name: \_\_\_\_\_
- Relationship to Participant: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

### Emergency Contact:

- Emergency Contact Name: \_\_\_\_\_
- Relationship to Participant: \_\_\_\_\_
- Phone Number: \_\_\_\_\_

School Information:

- School Name: \_\_\_\_\_
- Grade/Year: \_\_\_\_\_
- GPA (if applicable): \_\_\_\_\_
- School Phone Number: \_\_\_\_\_

Additional Information:

- Are you involved in any extracurricular activities?  Yes  No
- Please specify: \_\_\_\_\_
  
- Do you have any special dietary restrictions or allergies?  Yes  No
- Please specify: \_\_\_\_\_
  
- What are your interests or hobbies? \_\_\_\_\_
  
- How did you hear about our program? \_\_\_\_\_
  
- Please indicate your racial or ethnic background (check all that apply):
  - African American
  - Asian
  - Hispanic/Latino
  - Native American/Alaska Native
  - Native Hawaiian/Pacific Islander
  - White
  - Other (please specify): \_\_\_\_\_

I acknowledge that the information provided is accurate and will be used for program-related purposes.

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

Date: \_\_\_\_\_



## Youth Sign In-Out Policy

Date \_\_\_\_\_

The Youth Sign In-Out Policy is designed to ensure the safety and accountability of participants in the "CompelHer" program during their arrival and departure from program activities.

1. **Sign In and Sign Out:** Parents/guardians or authorized individuals are required to sign their child in upon arrival and sign them out upon departure from "CompelHer" program activities.

2. **Authorized Pick-Up Persons:** Only individuals listed as authorized pick-up persons on the participant's registration form are permitted to sign out and take custody of the child. Photo identification may be required.

3. **Late Arrivals:** In the event of a late arrival, participants must be signed in by a parent/guardian or authorized individual. The reason for the tardiness will be documented.

4. **Emergency Contacts:** In case of a medical or other emergency, the program will contact the parents/guardians or authorized emergency contacts to arrange for the child's pick-up or provide care.

Failure to comply with this Sign In-Out Policy may result in restrictions on program participation, removal from the program, and potential legal action if warranted.

I acknowledge that I have received, read, and understood the "CompelHer" Youth Sign In-Out Policy and will adhere to its guidelines and requirements.

Participant's Name: \_\_\_\_\_

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

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

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



## Youth Code of Conduct

The "CompelHer" program is committed to creating a safe, respectful, and inclusive environment. This Code of Conduct outlines expectations for youth participants attending in-person meetings.

### Code of Conduct:

1. **Respect for All:** Participants are expected to treat each other, program staff, and volunteers with respect and kindness. Discrimination, harassment, bullying, or any form of disrespectful behavior will not be tolerated.
2. **Attendance and Punctuality:** Attend meetings on time and for the full duration. If you cannot attend, please inform the program staff in advance.
3. **Appropriate Attire:** Dress in a manner that is appropriate for the activities and reflects respect for others.
4. **Use of Electronic Devices:** Use of electronic devices, such as smartphones, during meetings should be limited to program-related activities unless otherwise specified by program staff.
5. **Safety and Well-Being:** Participate in all activities with a focus on safety and the well-being of yourself and others.
6. **Confidentiality:** Respect the privacy of other participants by not sharing personal information without permission.
7. **Participation:** Engage in discussions, activities, and assignments with a positive attitude and a willingness to learn.
8. **Dispute Resolution:** In the event of a disagreement or conflict, seek assistance from program staff to help resolve the issue.

### Consequences of Non-Compliance:

- Verbal warning
- Written warning
- Temporary suspension
- Permanent removal

All participants and parents/guardians must review and acknowledge this Code of Conduct. By signing below, you agree to abide by the rules and standards outlined herein.

Participant's Name/Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_



**Parent Waiver & Permission for Youth to Be Transported by Teenage Driver**

Participant's Name: \_\_\_\_\_

I, the undersigned parent/guardian of the above-named participant, grant permission for my child to be transported by the teenage driver listed below during "CompelHer" program activities.

Teenage Driver Information:

- Full Name of Teenage Driver: \_\_\_\_\_

- Age of Teenage Driver: \_\_\_\_\_

- Vehicle Make and Model: \_\_\_\_\_

- License Plate Number: \_\_\_\_\_

Transportation Permission:

I understand and agree to the following:

- I authorize the above-named teenage driver to transport my child during program activities.
- I release "CompelHer," its staff, and volunteers from any liability related to transportation of my child by the teenage driver in accordance with this authorization.

I acknowledge and agree to the terms and conditions outlined in this Parent Waiver & Permission for Youth to Be Transported by a Teenage Driver.

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

Date: \_\_\_\_\_



**Parent Waiver & Permission for Teenage Driver to Transport Youth Off-Site**

Participant's Name: \_\_\_\_\_

Date: \_\_\_\_\_

I, the undersigned parent/guardian of the above-named participant, grant permission for my child to be transported off-site by the teenage driver listed below during "CompelHer" program activities.

Teenage Driver Information:

- Full Name of Teenage Driver: \_\_\_\_\_

- Age of Teenage Driver: \_\_\_\_\_

- Vehicle Make and Model: \_\_\_\_\_

- License Plate Number: \_\_\_\_\_

**\*\*Off-Site Transportation:\*\***

I understand and agree to the following:

- I authorize the above-named teenage driver to transport my child off-site during program activities.

- I release "CompelHer," its staff, and volunteers from any liability related to transportation of my child by the teenage driver in accordance with this authorization.

Off-Site Location and Purpose \_\_\_\_\_

\_\_\_\_\_

I acknowledge and agree to the terms and conditions outlined in this Parent Waiver & Permission for Teenage Driver to Transport Youth Off-Site.

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

Date: \_\_\_\_\_



## **Youth Pick-Up Authorization & Transportation Permission**

Participant's Name: \_\_\_\_\_

I, the undersigned parent/guardian of the above-named participant, grant permission for the authorized individual listed below to pick up and transport my child during "CompelHer" program activities.

Authorized Pick-Up Person:

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

- Relationship to Participant: \_\_\_\_\_

- Contact Phone Number: \_\_\_\_\_

Permission for Transportation:

I understand and agree to the following:

- I authorize the above-named individual to transport my child during program activities as specified.
- I release "CompelHer," its staff, and volunteers from any liability related to transportation of my child in accordance with this authorization.

I acknowledge and agree to the terms and conditions outlined in this Youth Pick-Up Authorization & Transportation Permission.

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

Date: \_\_\_\_\_



**Permission for Medical Treatment**

Participant's Name: \_\_\_\_\_

Emergency Medical Treatment Authorization:

I, the undersigned parent/guardian of the above-named participant, grant permission for "CompelHer" and its staff to obtain any necessary medical treatment for my child in the event of a medical emergency.

Medical Information:

Please provide any relevant medical information, allergies, and pre-existing conditions of my child to the best of my knowledge. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special Instructions:

[Include any specific instructions or medical information related to your child, if applicable]

\_\_\_\_\_

\_\_\_\_\_

I understand that every effort will be made to contact me as soon as possible in the event of a medical emergency. In the absence of such contact, I authorize the program to act in my child's best interests for their well-being.

Parent/Guardian's Signature:

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

Date: \_\_\_\_\_





## **Internet Youth Policy**

Date \_\_\_\_\_

The Internet Youth Policy is designed to ensure the responsible and safe use of the internet by youth participants in the "CompelHer" program while promoting digital literacy and online safety.

Policy:

1. **Responsible Internet Use:** Youth participants are expected to use the internet responsibly and in accordance with all rules and guidelines set forth by "CompelHer."
2. **Parental Consent and Supervision:** Parents/guardians are responsible for granting permission for their child's use of the internet during "CompelHer" activities. They are encouraged to supervise their child's online activities.
3. **Secure and Age-Appropriate Websites:** "CompelHer" will ensure that all websites and online content used during programs are secure and age-appropriate for youth participants.
4. **Privacy and Personal Information:** Youth participants must never share personal information, including full names, addresses, phone numbers, and email addresses, with anyone online without parental or guardian consent.
5. **Cyberbullying and Harassment:** Youth participants should not engage in cyberbullying, harassment, or inappropriate online behavior towards others. They should report any such incidents to program staff.
6. **Online Safety Training:** "CompelHer" will provide internet safety training to youth participants to help them understand potential risks and how to protect themselves online.
7. **Reporting Concerns:** Youth participants should report any concerns or inappropriate content encountered online to program staff or parents/guardians.

8. Accountability: Youth participants are accountable for their online behavior and must respect the rules and guidelines set by program staff.\*\*Consequences of Non-Compliance:\*\*

Failure to adhere to this Internet Youth Policy may result in consequences, including the inability to participate in "CompelHer" programs and activities conducted over the internet.

I acknowledge that I have received, read, and understood the "CompelHer" Internet Youth Policy and will adhere to its guidelines and requirements.

Participant's Name \_\_\_\_\_

Participant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Parent/Guardian's



## Confidentiality Policy

Date \_\_\_\_\_

This Confidentiality Policy outlines the commitment of "CompelHer" to safeguarding confidential information related to its program participants, staff, volunteers, and organizational operations.

1. Confidential Information: "CompelHer" considers any information of a sensitive, personal, or proprietary nature to be confidential. This includes, but is not limited to, personal participant data, staff and volunteer records, financial information, program strategies, and sensitive communications.
2. Confidentiality Obligation: All program staff, volunteers, and participants are bound by an obligation to maintain the confidentiality of such information. This obligation extends to not disclosing, sharing, or using confidential information for any purpose other than what is necessary for the program's operation.
3. Use of Confidential Information: Confidential information should only be used for legitimate program-related purposes and with the proper authorization.
4. Disclosure of Confidential Information: Confidential information will not be disclosed to external parties without the written consent of the individuals involved, unless required by law.
5. Training: All program staff, volunteers, and participants will receive training and guidance on the handling of confidential information to ensure compliance with this policy.
6. Data Security: Measures are in place to secure confidential data, including password protection, data encryption, and restricted access to electronic records.
7. Breach Reporting: Any suspected or actual breaches of confidentiality must be reported immediately to program management for appropriate action and resolution.

8. Retention and Destruction: Confidential information will be retained only for as long as necessary for program purposes and will be properly disposed of when no longer needed.

Failure to comply with this Confidentiality Policy may result in disciplinary actions, up to and including termination of employment, removal from the program, and legal actions if warranted.

I acknowledge that I have received, read, and understood the "CompelHer" Confidentiality Policy and will adhere to its guidelines and requirements.

Participant's Name \_\_\_\_\_

Participant's Signature \_\_\_\_\_

Date: \_\_\_\_\_

Employee/Volunteer's Name \_\_\_\_\_

Employee/Volunteer's Signature \_\_\_\_\_

Date: \_\_\_\_\_



## **Photo, Media, and Video Authorization**

Program Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

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

I, the undersigned parent/guardian of the above-named participant, hereby grant permission to CompelHer to use photographs, video footage, and media content taken during the program for the following purposes:

**Publication:** I authorize the use of photographs and videos of my child in program-related publications, including brochures, newsletters, websites, and social media platforms, for the purpose of promoting the program.

**Media Coverage:** I consent to my child being interviewed or photographed by representatives of the media for coverage related to the program.

**Archiving:** I understand that photographs, videos, and media content may be retained in the program's archives for historical and record-keeping purposes.

I also acknowledge and understand the following:

- CompelHer will not disclose personal information such as addresses, phone numbers, or email addresses in any published materials or media coverage.
- I will not receive compensation or any other form of remuneration for the use of my child's photographs, videos, or media content.
- I release CompelHer, its staff, and its volunteers from any liability for the use of photographs, videos, or media content in accordance with this authorization.

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



**Affirmation Consent Agreement**

Date \_\_\_\_\_

Consent:

I, the undersigned parent/guardian of the youth participant named below, grant permission and consent for my child to practice affirmations as part of the "CompelHer" program. Affirmations are positive, self-affirming statements and can be a powerful tool for personal growth and development.

Youth Participant's Full Name: \_\_\_\_\_

Age of Youth Participant: \_\_\_\_\_

Confidentiality:

I understand that any affirmations or personal statements shared by my child during the program will be kept confidential and will not be disclosed to external parties without written consent, except as required by law.

Release of Liability: I release "CompelHer," its staff, and its volunteers from any liability related to the practice of affirmations in accordance with this consent.

Failure to adhere to this Affirmation Consent Agreement may result in restrictions on my child's participation in certain program activities.

I acknowledge that I have received, read, and understood the "CompelHer" Affirmation Consent Agreement and grant consent for my child to practice affirmations as part of the program.

Parent/Guardian's Full Name \_\_\_\_\_

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



**Youth Initiative Virtual Meeting and Publicity Code of Conduct  
Media & Publication Release**

I, the undersigned participant, acknowledge and agree to abide by the following Code of Conduct when participating in virtual meetings and related events as part of "CompelHer's" Youth Initiative:

1. **Respectful Conduct:** I will treat all participants, program staff, and volunteers with respect and courtesy, refraining from any form of harassment or inappropriate behavior.
2. **Privacy and Confidentiality:** I understand the importance of maintaining the privacy and confidentiality of others and will not record, share, or disclose sensitive information discussed during the meetings.
3. **Appropriate Behavior:** I will use appropriate language, dress appropriately, and maintain an appropriate background during virtual meetings and events.
4. **Technical Readiness:** I will ensure my device, internet connection, and any necessary software are ready before the meeting. Technical issues will not disrupt the event for others.
5. **Security and Privacy:** I will not share meeting links, access credentials, or any confidential information with unauthorized individuals.

Participant's Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Media & Publication Release:**

I hereby grant permission for "CompelHer" to use photographs, video footage, and media content of myself taken during the program for the following purposes:

1. **Publication:** I authorize the use of my media in program-related publications, including brochures, newsletters, websites, and social media platforms, for the purpose of promoting the program.
2. **Media Coverage:** I consent to my potential inclusion in media coverage related to the program.

I also acknowledge that "CompelHer" will not disclose my personal information in any published materials or media coverage. I release "CompelHer," its staff, and its volunteers from any liability for the use of my media content in accordance with this authorization.

**Violation of Agreement:**

I understand that non-compliance with this agreement may result in my removal from the virtual meeting or event, without refund, and may affect my participation in future events.

**Acknowledgment:**

I acknowledge and agree to the terms and conditions outlined in this Youth Initiative Virtual Meeting and Publicity Code of Conduct with Media & Publication Release.

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

Date: \_\_\_\_\_





## **Virtual Meeting/Event Participant Agreement**

Date \_\_\_\_\_

I, the undersigned participant, agree to the following terms and conditions:

1. **Respect and Behavior:** I will conduct myself respectfully and professionally during all virtual meetings and events. I will refrain from disruptive, offensive, or inappropriate behavior.
2. **Privacy and Security:** I will not share meeting/event links or access with unauthorized individuals and will take steps to protect the privacy and security of the virtual environment.
3. **Attendance and Punctuality:** I will make best efforts to attend scheduled virtual meetings and events on time. In case of lateness or absence, I will inform program organizers in advance.
4. **Technical Requirements:** I will ensure that I have the necessary technology and a stable internet connection to participate in virtual meetings and events.
5. **Participation:** I will actively engage in discussions, activities, and tasks as required by the program.
6. **Recording and Media:** I understand that virtual meetings/events may be recorded for program purposes. My participation gives consent to such recordings.
7. **Code of Conduct:** I will adhere to the program's code of conduct, which applies to virtual interactions.

Failure to comply with this Virtual Meeting/Event Participant Agreement may result in restrictions on participation or removal from the program's virtual meetings/events. I acknowledge that I have received, read, and understood the "CompelHer" Virtual Meeting/Event Participant Agreement and will adhere to its guidelines and requirements.

Participant's Name \_\_\_\_\_

Participant's Signature \_\_\_\_\_



## Parent/Guardian Acknowledgement of Informational Forms

Participant's Name: \_\_\_\_\_

Date: \_\_\_\_\_

I, the undersigned parent/guardian of the above-named participant, acknowledge that I have received and reviewed the informational forms provided by "CompelHer" related to my child's participation in the program.

I confirm that I have received, read, and understood the following informational forms:

- Youth Demographics Sheet
- Parent/Guardian Acknowledgement of Informational Forms
- Youth Sign In-Out Policy
- Youth Code of Conduct
- Parent Waiver & Permission for Youth to Be Transported by Teenage Driver
- Parent Waiver & Permission for Teenage Driver to Transport Youth Off-Site
- Youth Pick-Up Authorization & Transportation Permission
- Permission for Medical Treatment
- Emergency Contact Information
- Internet Youth Policy
- Confidentiality Policy
- Photo, Media, and Video Authorization
- Affirmation Consent Agreement
- Youth Initiative Virtual Meeting and Publicity Code of Conduct Media & Publication Rel

I understand that by allowing my child to participate in "CompelHer," I am agreeing to the terms and conditions outlined in the provided forms. I consent to my child's participation in the program and acknowledge that I have been given an opportunity to ask questions or seek clarification.

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

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