

Amigos Application and Consent Form



Please return to: _____ **Room #** _____

Return no later than: _____

Your School _____ Your Name _____ Phone # _____

City: _____ Date: _____

Your Email Address _____

Your Grade _____ Your Age _____ Male Female

Please give the name of a teacher as a reference _____

Instructions

In order to match your interests with those of other students, please give as much information as you can. Every effort will be made to match all interested students.

Part A: Background information

1. What has motivated you to apply to the Amigos Program? _____
2. What experiences might you bring to the Program? _____
3. How might this Program benefit you? _____
4. How might your involvement benefit others? _____

Part B: What are you interested in now? Please ✓ the appropriate boxes below.

1. What school activities, outside of the classroom, do you participate in now?

Sports (please list sports you like to play) _____

Sports (please list sports you like to watch) _____

Clubs (please list) _____

Dances

Eating in cafeteria

Computer/video games

Noon hour events

Drama

Buy-ins

Crafts

Spirit Days

Dancing

Reading

Music

Art

Other (please list) _____

2. What activities would you like to be involved in?

3. List as many of your interests as you can think of (the type of music you like, type of video games you like, interests shared with others, interests at home or outside, pets, seasonal activities, favourite foods etc.)

4. Are there any other things that you would like to share that we have not already asked?

Part C: Photo and Name Authorization form for the Amigos Program

I hereby authorize Heads Up for Inclusion to use (please check all that apply):

- name
- picture (photos, video/film etc.) and
- artwork
- student's email (strictly to notify students about Amigos events, email will not be shared with any other parties)

of (student's name) _____ to be published and used for educational, public relations and/or fundraising purposes (ie. Newsletter, information brochures, displays etc.) My consent is for such purposes, and not limited to these examples.

Signature of Student (if 18 years of age or older) _____

OR

Signature of Parent / Guardian _____

Date: _____