



YOUTHLINK APPLICATION

Date: _____

Parent Information

Parent First Name: _____ Parent Last Name: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____

Gross Annual Household Income: \$ _____ Number of people in household: _____

Child Information

Child 1:

First Name: _____ Last Name: _____

Date of Birth: _____ (MM/DD/YYYY)

Program of Interest: _____

Location (facility name): _____

Child 2:

First Name: _____ Last Name: _____

Date of Birth: _____ (MM/DD/YYYY)

Program of Interest: _____

Location (facility name): _____

Child 3:

First Name: _____ Last Name: _____

Date of Birth: _____ (MM/DD/YYYY)

Program of Interest: _____

Location (facility name): _____

I, _____ agree that my child will attend all scheduled activities that are funded by the YouthLink grant, unless I or my child are sick, or other extenuating circumstances occur.

AUDIO/VIDEO/PHOTOGRAPHY CONSENT

I hereby authorize HopeLink of Southern Nevada ("HopeLink"), and those acting pursuant to its authority a nonexclusive grant to:

- (A) Record my likeness and voice on video, audio, photographic, digital, electronic, online format or on any and all other media.
- (B) Use my name in connection with these recordings.
- (C) Use, reproduce, publish, republish, exhibit, edit, modify, or distribute, in whole or in part, these recordings in all media without compensation for any purpose that HopeLink, and those acting pursuant to its authority, deem appropriate, including promotional or advertising efforts. These recordings may appear in a variety of formats and media now available to HopeLink and that may be available in the future (e.g. print publications, video tapes, CD-ROM, Internet, mobile, digital).

I hereby release HopeLink and those acting pursuant to its authority from liability, claims, and demands for any violation of any personal or proprietary right I may have in connection with such use, including any and all claims for libel, defamation, or invasion of privacy. I understand that all such recordings, in whatever medium, shall remain the property of HopeLink. I have read and fully understand the terms of this release.

Parent/Guardian Signature: _____ Date: _____