



STYC

2018-19 School Year

Are you interested in representing
your High School in the
South Texas Youth Congress?

If you are interested in being a candidate—
you are invited to attend a presentation to learn more.

WHEN:

WHERE:

Contact _____
for your pass to attend.





Candidate Filing Form

Candidate Name (PRINT)

High School

Grade

Date of Birth

City

County

email

Phone

Signature

DATE

Check List

- Candidate Filing Form**—Submit to Principal and STYC.
- Essay**—300-500 word why you want to be a candidate.
- Parent Approval**—Parent sign consent form.
- Principal, Counselor and Teacher Approval**
- Parent and Medical Information**
- Candidate Support**

Submit application to:

Candidate for the
South Texas Youth Congress

Student (PRINT)

High School

Principal Approval

Principal (PRINT)

Signature

Date

Counselor Approval

Counselor (PRINT)

Class

Signature

Date

Teacher Approval

Teacher (PRINT)

Class

Signature

Date



Guardian Contact Information

Please PRINT

Name: _____ Relationship: _____

Address: _____ State: _____ Zip Code: _____

email: _____ Cell Phone: _____

Other Phone: _____

Medical and Insurance Information

Allergies: _____

Gender: FEMALE MALE Date of Birth: _____

Insurance Provider: _____

Insurance Provider Address: _____

State: _____ Zip Code: _____

Insurance Provider Phone Number: _____

Group Number: _____ Policy Number: _____





2018-19 School Year

Activities List

Please list school organizations, clubs, band, sports, after school job, and such:

Name Activity

Time required
per week

Name Activity	Time required per week



Parent Consent Form

Consent to participate in the South Texas Youth Congress

Student's Name: _____ High School: _____

I hereby consent that my child or ward be permitted to participate in the South Texas Youth Congress and related activities. I also, permit my child or ward to travel to and from such activities.

I understand and agree to the following:

- The South Texas Youth Congress intent is to provide students first-hand experience on the legislative process, basic state government operations, leadership, and group dynamics.
- My child or ward will be responsible for their own transportation and the STYC is not responsible for any private transportation. STYC will reimburse for mileage expenses at the accepted State rate upon filing a W-9 form with DF. students with vehicles are expected to remain present for the duration of STYC related event. If any students leaves the event, the Dream Forward Foundation (DF) and all officials, employees, agents, and volunteers are not responsible. Staff will notify parents the student leaves prior to the end of the Youth Congress. If the student must leave prior to the end of the Youth Congress, parents must notify DF prior to the start of the event.
- I hereby release and discharge the DF and all officials, employees, agents, and volunteers associated with the STYC and related activities from any and all claims and demands arising out of or in any way connected with my child or ward's participation in the STYC and related activities.
- I agree to indemnify and hold harmless the Dream Forward Foundation, South Texas Youth Congress, and other sponsoring agencies, and other sponsoring agencies' officials, employees, agents, and volunteers against any and all liability, damage loss, claims or demands whatsoever, including attorney fees, which arise out of or are in any way connected with my child or ward's participation in the STYC or related activities.



Parent Consent Form

The South Texas Youth Congress (STYC) is an initiative of the Dream Forward Foundation (DF)

● I authorize any official, employee, agent, or volunteer to consent to emergency medical treatment as necessary for the health and safety of my child or ward. I further agree that no official, employee, agent, or volunteer will be held responsible for injuries or damages arising from the provision of any such emergency medical treatment. I do hereby agree to indemnify and hold harmless the Dream Forward Foundation, South Texas Youth Congress and other sponsoring agencies' officials, employees, agents, and volunteers from any and all liability, damage, loss, claims, or demands whatsoever, including attorney's fees, which arise out of or are in any way connected with the provision of such emergency medical services.

I further grant permission for _____ to appear in person or in voice, video, photographic presentation, for radio, television, the South Texas Youth Congress website, electronic or print media reports and/or media campaign(s) resulting from participation in the Youth Congress.

Participants Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Dream Forward Foundation

The South Texas Youth Congress (STYC) is the primer initiative of the Dream Forward Foundation (DF) IRS 501c3 organization operating in Texas.