

## **FOR OFFICIAL USE**

REGISTERED

NOT REGISTERED

WAITLIST

## **ELIGIBILITY REQUIREMENTS:**

- Must be at least 16 years old (Only 5 youth members will be permitted to attend)
- Must live in Foster City
- Must commit to attending scheduled presentations

PERSONAL INFORMATION	JAL INFORMATIC	N:
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First and last name:						
Are you at least 16 years old?	YES	NO		Are you 18 or older?	YES	NO
Home Phone:			Cell Phone:			
Email Address:						
Home Address:						
Current Occupation:						
Employer:						
Emergency Contact:						
	(Name)			(Phone Number)		
Have you ever worked for, volunteer	ed for, or h	eld office	e within the City	of Foster City?	YES	NO
If yes, which department and when	n?					
Why are you interested in participati						
Please list any additional relevant ba	ockaround	informat	ion:			
rtease list any additional relevant ba	ickground	iiiioiiiiat	1011.			
I hereby absolve the City of Foster Comp participation in this academy.	ity, its emp	oloyees, (	and officers from	all liability which may a	rise as the I	result of
Applicant Signature					ate	
Parent/Guardian Signature (if applicant is	under 18)				)ate	