

**Youth Registration Form for  
24th AAW National Symposium**

June 18th to 20th, 2010  
Connecticut Convention Center  
Hartford, Connecticut

Registered Youth (10 - 17 years old) Full registration free, including banquet when accompanied by fully registered adult. Transportation, meals and hotel at expense of accompanying adult.

Youth info:

Last name \_\_\_\_\_

First name \_\_\_\_\_

Age as of 6/20/10 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (parents or guardian) (\_\_\_\_\_) \_\_\_\_\_

**Email** (parents or guardian) \_\_\_\_\_

**\*\*\*Please PRINT your email very clearly.**

Contact in case of emergency \_\_\_\_\_

Registered adult accompanying youth:

Last name \_\_\_\_\_

First name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_\_) \_\_\_\_\_

**Email** \_\_\_\_\_

**\*\*\*Please PRINT your email very clearly.**

Relationship to youth \_\_\_\_\_

The undersigned accompanying adult, agrees that he/she will accept full responsibility for the transportation, meals, housing, supervision, actions and care of the above registered youth.

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

If the accompanying adult named above is not the parent or legal guardian of the above registered youth, then the undersigned parent or legal guardian approves of the above registered youth, attending the symposium under the care and supervision of the above named adult.

Signed (Parent) \_\_\_\_\_ Date \_\_\_\_\_