



YELL Youth Leadership Program

Sponsored by

It's your life-take charge.

APPLICATION 2020-2021

(Must be high school junior during 2020-2021 school year)

Name: (please print) _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

___ Male ___ Female School: _____

Date of Birth: _____ T-Shirt Size: _____

Other School Activities You Are Involved In: _____

NOTE: Transportation will NOT be provided to and from YELL sessions.

TWO Recommendations/Signatures are REQUIRED (One must be your guidance counselor or high school principal)

1. _____ Relationship: _____

2. _____ Relationship: _____

High School GPA: _____ (Must be 2.5 or higher)



Please attach a ONE-PAGE typed essay on what leadership means to you and why you would be a good candidate for the YELL program.

Parental Permission Release and Waiver:

I hereby give permission for _____ to participate in all aspects of the YELL program, including field trips, activities and other necessary aspects of the program. I understand that my child may be photographed for marketing and advertising purposes. I also understand that if my child misses MORE THAN TWO sessions or if there is a discipline issue, he/she may be dismissed from the program. I also understand that my child is expected to conduct himself/herself in a manner of professionalism, courtesy and respect for others at all times during the program. I also waive any and all rights and claims for damages that I may have against the sponsoring parties or any individuals associated with this program for any and all loss, injuries or death.

Signed: _____ Date: _____

DEADLINE FOR APPLICATIONS: July 1 (Mail to YELL, PO Box 848, Greenwood, MS 38935. You may also bring application to the Chamber of Commerce, 402 Hwy. 82 West) You can also EMAIL your application to info@greenwoodms.com.