

2013 AACC Youth Symposium Registration Form



1. First Name _____ Middle Initial _____ Last Name _____ (required)
2. Email (valid email required) _____
3. Grade _____ School _____
4. Field(s) of Interest _____

5. Vegetarian Plate: Yes _____ No _____
6. Parents/Guardian Phone (required) _____
7. Parents/Guardian Email (preferred) _____
8. Where did you hear about us? _____
If other, please specify _____
9. Message/Special Request _____

(To be signed only if the "youth" is less than 18 years old)

I _____ the (parent / legal guardian (circle one)) of _____
(child's name), do hereby consent for _____ (child's name) to participate in the
2013 AACC Youth Symposium and hereby consent for the use of the information contained on
this form in connection with the 2013 AACC Youth Symposium.

Printed name of parent or legal guardian

Signature of parent or legal guardian

Date