



# Oregon Boys State 2013

## Application

<b>First Name</b>		<b>Last Name</b>	
<b>Preferred Name</b>		<b>Date of Birth</b>	
<b>Mailing Address</b>			
<b>City</b>		<b>State</b>	<b>Zip Code</b>
<b>Physical Address (if different)</b>			
<b>Applicant Phone</b>		<b>Applicant Email</b>	
<b>School Name</b>		<b>School Location</b>	
<b>Do you participate in</b>	<input type="checkbox"/> Band/Chorus	<b>GPA</b>	<b>Awards in School</b>
	<input type="checkbox"/> Sports	<b>Class of</b>	<b>Office(s) Held</b>
<input type="checkbox"/> Debate/Speech			
<input type="checkbox"/> Student Government			
<input type="checkbox"/> Other:			
<b>T-Shirt Size</b>	<b>Do you identify more as a</b>		<b>Awards/Activities out of School</b>
	<input type="checkbox"/> Duck or a		
	<input type="checkbox"/> Beaver?		

### Future Educational/Career Goals

### Oregon Boys State Rules

- I will act safely, respectfully, and responsibly at all times, reporting violations and/or injuries or illnesses immediately to staff.
- I will abide by Boys State policy and abstain from the use of alcohol, tobacco, illegal drugs, weapons and gambling while at Boys State.
- I will avoid fraternization with the opposite sex.
- I will remain for the entire program, attend all Boys State functions and keep to the schedule.
- I will remain in the designated areas at all times. I shall not leave campus or travel in a vehicle without staff approval.
- I will bathe regularly and dress appropriately at all times.
- I will safeguard the property of others, including roommates, other citizens, counsellors, staff, and the university campus.
- Upon request, I will provide a report to my sponsor and American Legion post of my experiences at Boys State.
- I understand violation of these rules is cause for being sent home.

**Applicant Agreement:** Please accept my application to attend the American Legion Oregon Boys State Leadership Academy. I am a legal resident of Oregon. I believe in the constitutional form of government of the United States of America and principles for which it stands. I that completing and submitting this application is not a guarantee that I will be accepted to attend Boys State. If accepted, I will follow the Boys State Rules and conduct myself in such a manner as to bring credit to myself, my sponsor, and the community in which I live. I agree to communicate with those who contributed to pay my expense to Boys State, both before and after, and to write letters outlining my expectations and experiences.

**Applicant Signature**

**Date**

**To be completed by a parent or guardian.**

<b>Name of Applicant</b>	<b>Name of Parent</b>	<b>Costs associated with Boys State</b> Non-refundable registration fee.....\$50
<b>Phone number of Parent</b>	<b>E-mail of Parent</b>	
<b>Indicate any Health Conditions, allergies, special diet, etc.</b>	<b>Medications Taken (both Over-the-counter and Prescription)</b>	Lost room key fee.....\$75 Replacement meal card .....\$5 Parking fee (entire week) .....\$10
<b>Medical Insurance Company</b>	<b>Insurance Policy Number</b>	<b>You may also wish to bring money for the Sundry Store, to buy city/county photographs, and purchase memorial DVDs.</b>
<b>Name &amp; Contact information of local News Paper for press release.</b>	<b>Alternate Emergency Contact Information</b>	

**Parent Permission:** My minor child is a legal resident of Oregon and has permission to attend Oregon Boys State. He is in good physical and mental condition with exceptions noted above, and may participate in any indoor or outdoor activity. In case of emergency, The American Legion is authorized to secure proper treatment until I can be reached. The American Legion is authorized to use his likeness or share information gathered concerning his attendance for promotional purposes. It's understood no compensation or fees are to be paid by The American Legion when used to promote its programs. My child understands the rules and has agreed not to use tobacco products, illegal drugs, liquor, firearms, or engage in other illegal activities during his week at Oregon Boys State. I acknowledge that my child/children might be exposed to topics or language of an adult nature. I agree to carry medical insurance, indicated above, which applies for the duration of the Oregon Boys State program. All medications (listed above, both over-the-counter and prescription) will be given to the Director upon arrival. We certify the information on this application is correct, complete and our son meets school certification requirements (below). Upon acceptance to the program, he will attend the complete program in order to graduate. I hereby release The American Legion, Oregon Boys State, Willamette University, and all of their members, staff, and officers from any liability for any harm that my child/children suffered during or as a result of participation in this event, including but not limited to physical or psychological injuries and I will indemnify and hold them harmless for any damage caused or liability incurred by my child/children.

**Parent Signature**

**Date**

**To be completed by a school official**

**School Certification:**

I certify that this candidate is a junior or home school student who has at least one semester to complete at my High School. He meets the following requirements: a) Was selected from the current Junior Class; b) Has qualities of leadership, character, scholarship, service, citizenship, and sportsmanship; c) Is physically able to participate in all phases of an active program; d) Is committed to be present for the entire session.

**Printed Name**

**Please affix the school seal over your signature.**

**Signature**

**Date**

**To be completed by the American Legion**



**American Legion Certification:**

This is to certify that a Representative of our Post has met with this Candidate personally and agrees that he meets all requirements for participation in the Boys State program.

**Post Number:**

**Signature of Sponsor:**

**Commander or Chairman Name**

**Date**

**Address**

**City**

**Zip Code**

**Email:**

**Home Phone:**

**Cell Phone:**