

**Application**  
2016 Annual Youth Leadership Forum  
of the New York State Council of Churches  
**February 15-17, 2016**

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**Student Information:**

Name of student: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please attach a type-written statement of 400-500 words explaining why you are interested in learning more about "Toward Racial Healing" from your Christian perspective.

**Parent Information:**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

My signature below represents my consent for my child (named above) to participate in this trip. I/we have included a \$50 non-refundable deposit to reserve my child's spot. I understand that the total cost for the program is \$385 and our deposit can only be refunded if space limitations prevent my child from participating this year.

Signature of Parent: \_\_\_\_\_

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

Please return completed applications by **December 10, 2015**.

Please make check payable to *New York State Council of Churches*, and mail to:

Brooke Newell,

28 Main Street, Potsdam, NY 13676

For more info, contact Brooke at: [brooke@cjgreen.net](mailto:brooke@cjgreen.net) • (315) 274-0224