PARENT/GUARDIAN COMMITMENT FORM
for
COBB YOUTH LEADERSHIP 2016-2017

The Cobb Chamber of Commerce, under the direction of the Leadership Cobb Alumni Association, sponsors the Cobb Youth Leadership program. The program focuses on developing leadership skills through interactive participation. The participants meet local, state and national leaders helping to frame their leadership style for the future. Another element of the program provides students from different schools a chance to meet and learn from each other as they expand their own leadership skills. Our community will reap the benefits from these relationships, as these students ultimately assume leadership positions in the future. Each participant must be a high school junior for school year 2016-2017 and a resident of Cobb County or a student in a Cobb County school.

PARTICIPATION COMMITMENT:

If your child is selected, they must be willing to make a commitment of their time and plan to attend **all** program events. Students must notify Chamber staff and class co-chairs at least 24 hours in advance of a conflict with a scheduled program. **I understand that if my child fails to attend any activity for any reason, he/she may not be allowed to complete the program and the tuition fee is forfeited.**

I give the support and commitment for my child, _____, to participate in the Cobb Youth Leadership program.

I also commit to attend an informational parent/guardian meeting prior to the class beginning in the fall.

TUITION FEE:

A tuition fee of **$650** is required to help offset the cost of materials, meals, lodging and bus expenses. Payment is only required upon acceptance into the program. Leadership Cobb Alumni Association may provide a scholarship (1 per year) to someone requiring financial assistance based on need.

If your child will be in need of financial assistance, please explain why financial assistance is needed. Use additional pages if necessary.

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If your child does not need financial assistance, please sign below and return with the other enrollment items.

Signature of Parent/Guardian: _____

Relationship: _____

Date: _____

PLEASE RETURNED SIGNED FORM TO: **Cobb Chamber of Commerce**
ATTN: Katie Guice
P.O. Box 671868
Marietta, GA 30006

Deadline to submit is Friday, April 22, 2016.