



STUDENT REGISTRATION FORM

NAME OF HIGH SCHOOL: _____
(Please insert the school name above)

Young Woman's Name: _____

Young Woman's Age: _____ Grade Level: _____

Parent/Guardian Contact Information:

Name: _____ Relationship to Student: _____
(Parent, Grandparent, Legal Guardian)

Home Address: _____
(Street, City, Zip)

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

Does the Young Woman (Student) have any special dietary needs? Yes No
If Yes, please explain _____

Does the Young Woman (Student) have any medical issues that the Symposium
Organizers should be made aware? Yes No
If Yes, please explain _____

By selecting this box, I am submitting the registration and authorizing participation for my Young Woman (Student) at the 2015 Young Women's Leadership Symposium in San Antonio, TX on November 14, 2015. This acknowledges that as the parent or guardian of Young Woman (Student) attendee, transportation to and from the Symposium will be my sole responsibility. I take full responsibility and waive and release from any liability all Symposium organizers, all Symposium Sponsors, and all parties of the Texas Diversity Council. Student participation in the 2015 Young Women's Leadership Symposium is fully voluntary. I also grant permission for my daughter (or granddaughter, relative, student) to be included in group event photos.

Signature of Parent/Guardian: _____

PLEASE EMAIL FORM TO: Mae Marshall at mae.marshall@texasdiversitycouncil.org
By FRIDAY, OCTOBER 30, 2015