

# **Theme: Control Your Destiny or Someone Else will**

## **PARENT/PARTICIPANT RELEASE FORM**

I \_\_\_\_\_ (Parent or Legal guardian) understand that the participation of \_\_\_\_\_ (Participant) in Omega Educational Foundation's 16th Annual Youth Leadership Conference. The events of the Youth Leadership Conference will be in a classroom setting. Omega Educational Foundation will bear the full cost of food for each participant in the event.

**Parent /Guardian must provide Transportation to and from the 16<sup>th</sup> Youth Leadership Conference.**

I understand that signing this release form is an acceptance to the above and a prerequisite to participate in the 16<sup>th</sup> Annual Youth Leadership Conference. In addition, it is your responsibility to inform the Program Coordinator of this program of any extenuating circumstances (medical, physical, diet, or mental) that affects the well-being of the participant or might detract from learning experiences of the other participants. Parents and Guardians are also responsible for ensuring each participant has no weapons, drugs, or any illegal substance that causes threat to him or the general body of participants.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Legal Guardian)

### **Print Below:**

Name of Parent or Legal Guardian: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell # \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

Emergency Phone for Day of the Event: \_\_\_\_\_

**PLEASE LIST ANY ALLERGIES, DIETARY RESTRICTIONS, OR MEDICAL CONDITIONS YOUR CHILD HAS:** \_\_\_\_\_

### **Please return to the address below:**

Omega Educational Foundation  
16th Annual Youth Leadership Conference  
P.O. Box 91302  
Los Angeles, California 90009

**Please contact Ricky L. Lewis (323) 658-2995 or [rickylewis@earthlink.net](mailto:rickylewis@earthlink.net) if you have any questions.**