

# High School Team Application

# TeenPower

# 2010

*Healthy Teens Powered by Vectren*

**Team Fees and Deadlines:**  
**\$1,000 on or before April 9<sup>th</sup>**  
**\$1,200 after April 9<sup>th</sup>**



**Team:** \_\_\_\_\_

**Team Advisor:** \_\_\_\_\_

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

Office Use Only:

Date Received: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Check # \_\_\_\_\_

## Youth Resources of Southwestern Indiana High School TEENPOWER 2010 Team Application

**Info**  
**Youth 1**  
**Youth 2**  
**Youth 3**  
**Youth 4**

**Name of School/Organization:** \_\_\_\_\_

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Advisor's Name** \_\_\_\_\_ **Position/Title:** \_\_\_\_\_

Email \_\_\_\_\_ Cell: \_\_\_\_\_

Summer Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Summer Phone ( ) \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

T-Shirt Size: S M L XL XXL XXXL Housing\* YES NO

\*One advisor per school/team is required to attend Team Time and be "on call" 24/7.  
Housing and meals are provided for one advisor for each paid team.

Name \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Grade 2010-11 \_\_\_\_\_

Email \_\_\_\_\_ T-Shirt Size S M L XL XXL XXXL

Name \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Grade 2010-11 \_\_\_\_\_

Email \_\_\_\_\_ T-Shirt Size S M L XL XXL XXXL

Name \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Grade 2010-11 \_\_\_\_\_

Email \_\_\_\_\_ T-Shirt Size S M L XL XXL XXXL

Name \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Grade 2010-11 \_\_\_\_\_

Email \_\_\_\_\_ T-Shirt Size S M L XL XXL XXXL

# Authorization

Our team consisting of one adult and four high school students (grades 9-12 during the 2010-2011 school year) would like to attend TEENPOWER from **Tuesday, June 1 to Friday, June 4<sup>th</sup>** at the University of Evansville, 1800 Lincoln Avenue, Evansville, Indiana. **Team check-in time: 8:30-9:30 a.m. on Tuesday, June 1. TEENPOWER will end at 9:00 p.m. on Friday, June 4<sup>th</sup>.** The first meal furnished for the conference is lunch on Monday and the last meal served will be dinner on Friday.

**We understand that it is TEENPOWER policy that "No camper may leave the campus for any reason during TEENPOWER except for family emergency as approved by the TEENPOWER Program Coordinator."**

Page one and two of the application are completed in full and I understand that reporting sex and race is for statistical information only. A check, purchase order, or proof of processing funds accompanies this application.

I have read all information included in this application and hereby authorize \_\_\_\_\_ to represent our school/organization at TEENPOWER 2010. My signature indicates our school's/organization's endorsement of this adult as a representative of our school/organization.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Principal or Director

Advisor's Agreement: I have read this application thoroughly and completely including the information above. I understand that I am to remain at the University of Evansville during the week of TEENPOWER unless other arrangement have been made. I am willing to participate as requested in the TEENPOWER Conference. I agree to be supportive of the teen participants from my school or organization in their efforts to share in the community skills and knowledge they will learn during the conference.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Adult Advisor