

REGISTRATION FORM

Saturday, September 17, 2016

At the University of Southern California



Student Name: _____ Guardian Name: _____

Grade in '16-'17: 7 8 9 10 11 12 Post HS DOB: _____ Age*: _____

*Please note that all Youth under the age of 16 must be accompanied by an adult

Mailing Address: _____
Street address City, State, Zip

Phone #: _____ Emergency #: _____

Student Email: _____ Guardian Email: _____

Name of School you are currently attending: _____

Social Worker Name: _____ Phone # _____ Email: _____
(If Applicable)

Will you need transportation to College Within Reach? Yes No (If yes, please complete transportation portion below)

Total # needing lunch: _____ Vegetarian Meals needed: _____

Adult Chaperone Information (Person who will accompany youth, must be 18 or older)*

Chaperone Name: _____ Phone #: _____ Email: _____

Address (if different): _____

I would like to be notified about CWR updates and info through? Mail Email

Relationship to youth (attorney, caregiver, CSW, mentor, residential staff, etc.): _____

I plan to: Attend Adult Workshops (recommended) Stay w/ youth during workshops

Pick **ONE** Remain at USC without Attending Workshops

***Organization policy requires groups to provide 1 adult chaperone for every 8 youth in attendance**

Transportation Information: Below are various pick up locations and their times of departure. **Select ONE** location to indicate the pick up site from which you will be transported. Please note: Attendance and seating are on a first-come, first-served basis.

South Central LA County		South Bay		East LA County		North LA County	
Compton HS	8:15 AM	Carson HS	7:45 AM	Montebello HS	7:45 AM	North Hollywood Library	8:15 AM
Crenshaw HS	8:00 AM	Gardena HS	7:30 AM	Paramount HS	8:15 AM	Palmdale HS	7:00 AM
Locke HS	7:30 AM	Long Beach Poly HS	7:45 AM	Pomona HS	8:00 AM	Pasadena HS	8:00 AM
Morningside HS	8:00 AM			Santee Complex	8:15 AM	San Fernando Library	7:45 AM
				Whittier Site	8:00 AM		

Total # needing transportation: _____ (Chaperones bringing multiple youth should only include themselves in the count on one form)

Parent/Caregiver MUST sign the transportation authorization below. I understand that United Friends of the Children is not responsible for any injury/damages which may be incurred on said trip, and in consideration for providing transportation, I agree to hold UFC harmless from claims for injury or damages occurring during said trip. I hereby authorize UFC to transport my student to College Within Reach.

Please submit registration form by mail, email or fax by September 12, 2016

Mail: UFC College Within Reach

OR

Fax: (213) 580-1820

1055 Wilshire Blvd, Suite 1955
Los Angeles, CA 90017

Email: rsvp@unitedfriends.org
Phone: (213) 580-1857

