



# Youth Application Packet

## Outdoor Discovery Series – Kayaking Expedition

Thank you for your interest in Grand Canyon Youth! Participating in a GCY program means stepping out of your comfort zone and engaging in a unique experience. It is worth the effort!

### 1. Receive Youth Application Packet

### 2. Return Youth Application & Deposit

*Please complete the application materials, sign all signature blanks, and return to GCY. A deposit is required when applying.*

### 3. Respond to Pre-Trip Emails

*One month, two weeks, and one week out GCY will send updates & important pretrip information.*

### 4. Make Final Payment

*One month prior to your program a final payment and any outstanding paperwork are due.*

### 5. Enjoy your GCY Program!!

*We are available to answer any questions, please contact GCY office staff at:*

928.773.7921

[programs@gcyouth.org](mailto:programs@gcyouth.org)



P.O. Box 23376 Flagstaff, AZ 86002 Phone: 928.773.7921 Fax: 928.774.8941  
[info@gcyouth.org](mailto:info@gcyouth.org) [www.gcyouth.org](http://www.gcyouth.org)

Dear Parent / Guardian,

Thank you for choosing to send your child on a Grand Canyon Youth program. We are excited to offer this unique and memorable learning experience. GCY is a 501(c)(3) nonprofit organization based in Flagstaff, Arizona. Our mission is to provide youth educational experiences along the rivers and canyons of the Southwest in an effort to promote personal growth, environmental awareness, community involvement, and teamwork among people of diverse backgrounds.

Our founders knew that wilderness river trips have the power to inspire and transform young people, and they wanted to motivate tomorrow's leaders to love and protect flowing rivers and wild places. Over the last 20 years, Grand Canyon Youth has grown to provide engaging, collaborative, and authentic learning experiences to groups from across the country, serving over 900 participants a year! River trips are powerful for all youth, and GCY is committed to creating custom programs that engage and serve a diverse array of groups.

Our educational philosophy is to inspire curiosity. Participants are given the opportunity to sleep beneath a blanket of stars, step outside of their comfort zones, overcome challenges, connect with peers on a meaningful level, and so much more. History, ecology, geology, archaeology, and current events come to life on program; the more participants question the world around them, the more they will learn. Every program is unique, and youth will get the chance to step away from technology and immerse themselves in magical places.

We cannot wait to meet your child, and have the opportunity to learn and grow together on the river. Use this packet as a resource to help you prepare for this program, and feel free to call the GCY office or reach out via email to [programs@gcyouth.org](mailto:programs@gcyouth.org) if you have any questions or concerns during this process.

Thank you,

A handwritten signature in black ink that reads "Emma Wharton".

Emma Wharton, MSW  
Executive Director



## Program Description Outdoor Discovery Series - Kayaking

### Program Information

Program Date: Saturday September 15, 2018

Total Cost: \$60

Minimum Deposit: \$30

Due: With Application

Final Payment: \$30

Due: Wednesday August 15, 2018

*\*If requesting Financial Aid, refer to the FA request form at the end of the packet for deposit and payment details.*

### Program Departure

7:30 a.m., **Saturday September 15<sup>th</sup>, at Grand Canyon Youth headquarters.** Dress in what you plan to wear on program. Make sure you have two full water bottles and you have eaten breakfast.

### Program Returns

Approximately 5:00 p.m., **Saturday September 15<sup>th</sup> at Grand Canyon Youth headquarters.** Parents will be called if students will be more than an hour late or early.

### About the Outdoor Discovery Kayaking Program

Come explore East Clear Creek Canyon! Just outside of Winslow, AZ, this narrow, winding reservoir cuts through a canyon of Coconino Sandstone. We will discuss human impact on wild places, learn about Leave No Trace principles, and participate in a service project to clean up this popular public space. This is a perfect introductory stretch of water to practice your kayaking skills and adventure outside of Flagstaff!

### What sets Grand Canyon Youth apart?

GCY is more than an outfitter. We provide some of the only access on the rivers of the Southwest dedicated to youth-driven experiential educational programming. We are committed to serving youth from a variety of backgrounds, so any participant interested in experiencing the educational power of rivers has that chance. GCY supports each program by offsetting 50% of trip price with money from donor, grants, and fundraising efforts.



# Frequently Asked Questions

## How difficult will the trip be?

It is helpful to be in good physical condition for your adventure. It is important to show up physically and mentally prepared to be outside and active, *all day*. This is part of the fun, but can be challenging for some. Having broken-in footwear and knowing how to stay hydrated are great places to start. We know you can do it, and we also know you will feel better if you arrive prepared for the challenge.

## What if there is an emergency?

Most emergencies can be prevented by taking care of yourself and listening to safety guidelines. GCY guides are certified Wilderness First Responders and travel with an emergency communication device and extensive first-aid materials on each trip. If there is an incident, the GCY office will work with guides to organize any needed support and contact parents. If you are nervous about any aspect of the program, please contact us for more information.

## What is the weather going to be like?

The weather at East Clear Creek is almost as unpredictable as the place itself. You need to prepare for all kinds of weather. Your program could be sunny and hot, cold and drizzly, or a combination of both! Packing layers will help you to adjust to the range of temperatures and conditions. You can check for the weather conditions prior to your program by searching the forecast for Winslow, AZ.

## How do I pack? What should I bring?

You should plan on bringing only the items detailed on the following Equipment list. Remember, anything you bring with you might get lost or ruined; please leave things that are important to you like jewelry or a special hat at home. Items such as iPods, cell phones, watches, and wallets are **intentionally left off the list**. Leave these at home, otherwise they will be collected before the beginning of the trip. GCY will provide lunch, extra water, and plenty of snacks, so **leave all food and drinks at home**. Bring a small bag of dry clothes to change into at the end of the day. Otherwise, everything else you need with you during the day will be packed into a small GCY dry bag. This dry bag will be strapped into the back of your boat for the duration of trip.

## What will GCY provide?

- Inflatable kayak
- Personal Flotation Device
- Paddles
- Dry bag
- Lunch & snacks
- Extra water
- Service project supplies
- First aid materials
- Emergency communication device

## Can I Borrow any Gear from GCY?

Yes, in fact it is encouraged! Please check with GCY before purchasing any items on the following equipment list. We have many items available to borrow at our warehouse. This includes river shoes and rain jackets. We understand that youth grow quickly, and purchasing new outdoor gear can be a burden. Stop by the GCY warehouse 1-2 weeks before your trip and try things on for yourself!

## Note about Medications

**Please bring TWO SETS of any necessary or prescription medications** (inhalers, Epi pens, psychotropic medications, etc.). **YOUTH MUST BE ABLE TO MANAGE AND ADMINISTER THEIR OWN MEDICATIONS**. GCY provides extensive first-aid kits for the program. You do not need to bring any over-the-counter medications or first-aid supplies.

## Equipment List

*We have many of these items at our office for you to borrow. Our intention is that families do not need to spend money on items that you might not use again.*

### Show up wearing:

- ◆ **River shoes:** One pair of sport sandals with a thick sole and heel strap, such as Texas, Chacos, or Keens.
- ◆ **Sun hat:** Preferably one with a large brim and a strap to keep from losing it in the wind. Bring a hat that you will wear. Wearing a hat during the day is required!
- ◆ **Quick-dry shorts:** They should be made of nylon or fast-drying material (not cotton!). Athletic shorts and swim trunks work well.
- ◆ **Long-sleeved, lightweight, cotton shirts:** These are ideal for sun protection. Think men's dress shirt. Wearing a shirt is required.
- ◆ **Bathing suits (girls):** *Be appropriate;* tying elements on swimsuits are not comfortable under your personal flotation device or recommended. Dark-colored, fast-drying sports bras work well as a bathing suit top.
- ◆ **Sunglasses**
- ◆ **Eyeglasses** (if you wear them). If you wear contact lenses, bring an extra set and a pair of glasses.
- ◆ **Retention device** for your sunglasses and/or eyeglasses so you don't lose them in the river. These are sometimes called "Chums" or "Croakies."

### Keep with you during the day:

- ◆ **Two water bottles:** You need at least 2 quarts. Camelbacks are okay as long as you bring a spare water bottle.
- ◆ **Two carabineers:** This metal clip lets you attach water bottle to the boat. You can find them at outdoor shops. Small ones are OK, but it needs to be bigger than a fun size Milky Way Bar.
- ◆ **Rain gear:** You'll need a rain jacket. Rain pants are optional (NO Ponchos).
- ◆ **Light-weight Fleece Jacket:** Bring 1.
- ◆ **Waterproof (disposable) camera:** (optional)
- ◆ **Personal medications:** YOUTH MUST BRING TWO SETS OF ANY NECESSARY OR PRESCRIBED MEDICATIONS. YOUTH MUST BE ABLE TO SELF-ADMINISTER ALL MEDICATIONS.
- ◆ **Personal toiletries (travel-sized & optional):** insect repellent, lip balm, tampons (with cardboard applicators) and pads.
- ◆ **Sunscreen:** A minimum of 15 SPF is required.

### For the drive home:

- ◆ **1 small Towel**
- ◆ **1 T-shirt**
- ◆ **1 pair of Underwear**
- ◆ **1 pair of Shorts/Pants**
- ◆ **1 pair of Socks**
- ◆ **Dry Shoes:** These can be tennis shoes, flip flops, etc... and will only be available at the end of the day to switch into.
- ◆ **1 Trash Bag:** This will be where you can store all of your wet/dirty clothes and shoes.
- ◆ **Personal toiletries (travel size):** Lotion, feminine products, etc...



## Youth Application

**Participant Name** \_\_\_\_\_

*First*

*Last*

\_\_\_\_\_  
*Address*

*City*

*State*

*Zip*

Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Participant email \_\_\_\_\_ School \_\_\_\_\_

**Gender** \_\_\_\_\_ **Age** \_\_\_\_\_

**Race/Ethnicity**

Asian

African American

Caucasian

Other

Native American

Hispanic/Latino

Pacific Islander

**Primary Parent(s)/Legal Guardian(s) Name** \_\_\_\_\_

*First*

*Last*

\_\_\_\_\_  
*Address*

*City*

*State*

*Zip*

Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Relation to participant \_\_\_\_\_

**Parent/Legal Guardian Name** \_\_\_\_\_

*First*

*Last*

\_\_\_\_\_  
*Address*

*City*

*State*

*Zip*

Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Relation to participant \_\_\_\_\_

**Alternate Emergency Contact** Please list someone other than parent/guardians listed above. Emergency contact will only be notified in the event the participant's parent/guardian are not available.

Name \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_

Relation to participant \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_\_) \_\_\_\_\_

**How did you hear about Grand Canyon Youth?** \_\_\_\_\_

# Health Information Form

As parent/guardian, GCY relies on you to advocate for your child. Please be thorough and exhaustive in completing this form. Your child is traveling to a wilderness area and may be over 24 hours away from definitive care. Advise GCY of any changes to your child's medical condition prior to their program. GCY guides have wilderness first aid training (WFR); they are not medical professionals. The confidential information provided in this form is shared only with applicable parties and program staff. It helps us provide the best care for your child.

**Participant Name** \_\_\_\_\_

**Height\*** \_\_\_\_\_ **Weight\*** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
(\*Necessary for lifejacket fitting\*)

**Have you been camping before?** Never      A Little      A Lot

**Swimming Ability** None      Fair      Good      Excellent

## Medical History

**Has your child ever been diagnosed with any of the following?**

Yes	No	Heart Condition	Yes	No	Depression/Anxiety
Yes	No	Diabetes/Hypoglycemia	Yes	No	Attention Deficit Disorder
Yes	No	Severe Headaches/Migraines	Yes	No	Emotional/Psychiatric Disorder or Concern
Yes	No	High or Low Blood Pressure	Yes	No	Substance Abuse ( <i>drugs, alcohol, tobacco</i> )
Yes	No	Seizures/Epilepsy/Neurological Disorder	Yes	No	Eating Disorder
Yes	No	Serious Head Injury	Yes	No	Anaphylaxis/Severe Allergic Reaction
Yes	No	Urinary Tract Problems/Infections	Yes	No	Food Allergy/Intolerance
Yes	No	Anemia or Blood Disorder	Yes	No	Hay Fever/Seasonal Allergies
Yes	No	Arthritis/Musculoskeletal Disorder	Yes	No	Asthma/Respiratory Condition
Yes	No	Sleep Disorder/Sleep Walking	Yes	No	Gastrointestinal Problems
Yes	No	Developmental Disability	Yes	No	Pregnancy

Yes No Has your child ever had surgery or been hospitalized overnight? When/what for?

\_\_\_\_\_

Yes No Does your child have any physical activity limitations? Please explain \_\_\_\_\_

\_\_\_\_\_

Yes No Does your child have any special needs? Please explain \_\_\_\_\_

\_\_\_\_\_

Yes No Does your child have any dietary restrictions? (ie: vegetarian) \_\_\_\_\_

## If yes to any of the above, please respond in detail to the following questions

When was each condition diagnosed? \_\_\_\_\_

\_\_\_\_\_

What are the trigger(s) & symptom(s)? \_\_\_\_\_

\_\_\_\_\_

How do you manage the condition(s)? \_\_\_\_\_

\_\_\_\_\_

Is there anything else we should know about the condition(s)? \_\_\_\_\_

\_\_\_\_\_

## Health Information Form Continued

**Medications** *Call GCY if you have questions about our medication policies.*

- ◆ Participants must be able to manage and administer their own medications. Unless otherwise arranged.
- ◆ We strongly recommend that participants remain on any prescription drug regimen while on a GCY program.
- ◆ Participants must provide two sets of all prescription medications. One set will be carried by the participant and the other set will be carried by the Trip Coordinator in case of loss/damage to the participant's set.
- ◆ Participants who have had or are at risk of an anaphylactic reaction and have been prescribed an epi pen must provide two epi pens.
- ◆ Participants with asthma/respiratory conditions **MUST** bring rescue inhaler if last use was within 5 years.

List ALL prescription and non-prescription medications your child is currently taking on a daily or regular basis. Please also list prescribed medication for emergency situations (examples: rescue inhaler, epi pens, etc).  
We are expecting your child will bring these medications on the program.

Medication	Purpose	Dosage	Frequency

**Physician Information**

Physician's Name \_\_\_\_\_ Phone Number (\_\_\_\_\_)\_\_\_\_\_

*If GCY has safety concerns regarding the participation of your child, we may contact you to gather more information. If your child has a medical condition, GCY may require a medical release from their physician before they are allowed to participate on a GCY program.*

**Insurance Information:**

Medical insurance is not required to participate. However, each participant and/or their parent(s)/guardian(s) is responsible for any medical expenses as a result of participation. We recommend contacting your insurance company to ensure coverage or purchasing trip insurance. Evacuations can be very costly.

Insurance Company \_\_\_\_\_ Phone Number (\_\_\_\_\_)\_\_\_\_\_

Policy Holder \_\_\_\_\_ Policy Number \_\_\_\_\_ Group Number \_\_\_\_\_

**Medical Release for** \_\_\_\_\_ *(Participant Name)*

In the event of an injury or illness requiring participant medical care and for whom I am the parent or legal guardian; I hereby give permission to attending medical personnel, Grand Canyon Youth's officers, directors, employees, representative agents, volunteers, contract individuals and all other persons or entities associated with it, the full power in consent to any and all necessary treatment, including epinephrine.



\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date



## Participant Agreement, Release & Assumption of Risk

In consideration of the services of Grand Canyon Youth, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "GCY"), I hereby agree to release, indemnify, and discharge GCY, on behalf of myself, my spouse/partner, my child, my parents, my heirs, assigns, personal representatives and estate as follows:

1. Assumption of Risk: I, \_\_\_\_\_ (parent/legal guardian), on behalf of myself and on behalf of my child, acknowledge that going on a river trip and all other activities related to, associated with, and/or essential to participation in a GCY program (hereinafter "Activity"), entails known and unanticipated risks that could result in: physical or emotional injury, paralysis, death, or damage to myself, property or to third parties. I understand that such risks cannot be eliminated without jeopardizing the essential qualities of the activity. I, on behalf of myself and my child, voluntarily accept personal responsibility for any liability, injury, loss, or damage in any way resulting from my participation in the Activity and related transport.

My initial below signifies that I expressly agree to section 1, above, that I know the implications of section 1, that I understand the language of section 1 and that I voluntarily accept the terms of section 1.

☀ **Parent/Legal Guardian Initials** \_\_\_\_\_

2. Identification of Risks: I understand that there are certain dangers, hazards, and risks inherent in the Activity and related transportation. I understand that such dangers, hazards, and risks may involve risk of injury and loss, both to person and property. I further understand that the risk of injury may include the possibility of permanent disability and death. There may be other risks not known or not reasonably foreseeable at this time. I further understand that GCY does not assume responsibility for any such injuries or loss.

Although every attempt will be made by GCY to ensure the health and safety of the participants, I understand that injuries and accidents may occur. Foreseeable risks include, among other things: whitewater rapids, turbulent water, and river currents. I can be jolted, jarred, bounced and shaken about during rides through rapids. It is possible that I could be injured if I come in contact or collide with storage containers, boat frames, oars, oarlocks or other equipment and supplies necessary to the operation of the expedition and outfitting the program. Rafts could capsize or I could be "washed" overboard into the water. Prolonged exposure to cold water can result in shock or hypothermia and in extreme cases can cause death and accidental drowning.

I can slip or fall during a hike or at camp; accidents can occur getting on and off the raft all of which can result in damage to equipment or personal injury. Exposure to the natural elements can be uncomfortable and/ or harmful. I am aware that this exposure could cause sunburn, dehydration, heat exhaustion, heat stroke, and death. GCY is not responsible for acts of nature, including but not limited to contact with flora & fauna. Furthermore, GCY employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather, river, or environmental conditions. They may give incomplete warnings or instructions and the equipment being used might malfunction. In addition, there are risks involved in traveling to and from the river or other destinations, including but not limited to airplanes and ground transportation such as automobiles, bus, shuttles, and personal transport. Significant elevation changes may be experienced through participation in this program. There are risks involved in completing the pre-trip requirements such as but not limited to community service and fundraising. Further, I understand that GCY is not responsible for the behaviors of any of its participants or the consequences of their actions.

My initial below signifies that I expressly agree to section 2, above, that I know the implications of section 2, that I understand the language of section 2 and that I voluntarily accept the terms of section 2.

☀ **Parent/Legal Guardian Initials** \_\_\_\_\_

3. Waiver and Release: In consideration of participation in the Event, I waive and release GCY, its employees, agents, volunteers, successors, and assigns, if any, from all claims for any liability, injury, loss, or damage in any way connected with my child's participation in the Activity, whether or not caused in whole or part by the negligence or other misconduct of any of the organizations or individuals mentioned above.

My initial below signifies that I expressly agree to section 3, above, that I know the implications of section 3, that I understand the language of section 3 and that I voluntarily accept the terms of section 3.

☀ **Parent/Legal Guardian Initials** \_\_\_\_\_

## Participant Agreement, Release & Assumption of Risk Continued

4. **Indemnification:** I agree to indemnify and hold harmless (in other words, reimburse and be responsible for) GCY and its employees, agents, volunteers, successors, and assigns from all claims for any liability, injury, loss or damage in any way connected with or arising out of my child's participation in the Activity, whether or not caused in whole or in part by the negligence or other misconduct of any of the organizations or individuals mentioned above. Should GCY or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

My initial below signifies that I expressly agree to section 4 above, that I know the implications of section 4, that I understand the language of section 4, and that I voluntarily accept the terms of section 4.

☼ **Parent/Legal Guardian Initials** \_\_\_\_\_

5. **Medical Treatment:** I hereby release and forever discharge GCY from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my child's participation in the Event.

My initial below signifies that I expressly agree to section 5 above, that I know the implications of section 5, that I understand the language of section 5, and that I voluntarily accept the terms of section 5.

☼ **Parent/Legal Guardian Initials** \_\_\_\_\_

6. I hereby certify that I have adequate insurance to cover any injury or damage I or my child may cause or suffer while participating in the Activity or, alternatively, I agree to bear the costs of such injury or damage myself. I further certify that my child has no medical or physical conditions which could interfere with my child's safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

My initial below signifies that I expressly agree to section 6 above, that I know the implications of section 6, that I understand the language of section 6, and that I voluntarily accept the terms of section 6.

☼ **Parent/Legal Guardian Initials** \_\_\_\_\_

7. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
8. We require this form signed and returned **AS IS**. Your signature below represents an acceptance of this document as originally written. Any edits to this agreement will not be honored, and will default to the original verbiage.

**I HAVE READ THIS WAIVER, RELEASE OF LIABILITY, AND INDEMNIFICATION. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I AM SIGNING THIS WAIVER, RELEASE OF LIABILITY, AND INDEMNIFICATION VOLUNTARILY ON BEHALF OF MYSELF AND ON BEHALF OF MY CHILD. I INTEND THAT THIS WAIVER AND RELEASE OF LIABILITY SHALL BE CONSTRUED BROADLY TO PROVIDE A RELEASE AND WAIVER TO THE MAXIMUM EXTENT POSSIBLE UNDER APPLICABLE LAW.**

☼ \_\_\_\_\_  
**Participant Signature**

\_\_\_\_\_  
**Participant Printed Name**

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

### **IF THE PERSON PARTICIPATING IN THE ACTIVITY IS NOT YET 18 YEARS OLD:**

As parent or legal guardian of the above-named individual, I verify that I fully understand, agree to, and accept all provisions of this Waiver, Release of Liability and Indemnification.

☼ \_\_\_\_\_  
**Parent/Legal Guardian Signature**

\_\_\_\_\_  
**Parent/Legal Guardian Printed Name**

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

## Personal Contract

Participation is a privilege. By signing this document, you are committing to good behavior. You agree to

- ◆ Complete ALL my pre-trip requirements
- ◆ Come prepared for the program with necessary equipment & supplies
- ◆ Maintain a positive attitude: be flexible, patient, and helpful in new or challenging situations
- ◆ Be respectful of others in the group
- ◆ Dress appropriately at all times
- ◆ Leave behind all electronic devices
- ◆ Participate positively and fully in all group meetings and activities
- ◆ Practice safety first! Follow all safety expectations set out by the adult leaders
- ◆ Not be a danger to yourself or others. Take care of yourself and others on the trip.
- ◆ Not bring any drugs, tobacco alcohol or weapons. Please leave pocket knives at home.
- ◆ Refrain from engaging in romantic or exclusive relationships.
- ◆ Take care of the remarkable places you will be visiting.

## Parent/Guardian Permission for Participation

There are inherent risks involved with participating in the GCY program. It is a parent's/guardian's responsibility to become informed about these risks and make a deliberate choice in supporting your child's participation.

- ◆ We rely on parents'/guardians' judgment to not involve their child in our programs if they believe the child could pose a behavioral risk. Failure to do so could make parents/guardians liable.
- ◆ GCY is a private, nonprofit organization. We have the right to exclude any participant who we believe, at our sole discretion and for any reason, could pose a risk to themselves or other participants beyond our ability and resources to manage within an appropriate standard of care.
- ◆ If Trip Leaders and/or Trip Coordinators have cause to believe any participant is unwilling to follow directions, safety rules, the law, or represents an unacceptable risk to themselves or to others, that youth may be separated from the group and evacuated from the trip at the expense of parents/guardians. Youth may be held legally responsible if they break any law while participating in the GCY program.
- ◆ Parents/Guardians should talk with their child, stressing the importance of following all expectations and safety practices set by GCY.
- ◆ Parents/Guardians should encourage their child to communicate any concerns immediately with adult supervisors on the trip.

**I have read and acknowledge the risks detailed in this form and consent to my child's participation in a GCY program knowing of all above risks. My child fully understands, and they will adhere to all expectations outlined in the personal contract. My child may also participate in all activities pertaining to GCY, including fundraisers, community service projects, transportation, and river trips during their involvement. Breach of this contract may lead to participant's dismissal from the program.**



\_\_\_\_\_

Parent/Legal Guardian Signature

\_\_\_\_\_

Date



\_\_\_\_\_

Participant Signature

\_\_\_\_\_

Date

## Cancellation & Refund Policy

GCY reserves the right to cancel any program and/or alter trip dates due to weather, safety concerns and/or any other unforeseeable circumstances. Participants who cancel more than 30 days before trip departure are entitled to a program refund. Participants who cancel 30 days or less from their trip departure date are ineligible for a refund.

☀ **Parent/Legal Guardian Initials** \_\_\_\_\_

## Media Release

I hereby grant Grand Canyon Youth, its co-sponsoring organizations, partners, media representatives, employees, volunteers and trip participants the right to photograph, record or film my child's participation in a Grand Canyon Youth program without recourse. This includes the right to use photographs, audio or film in promotional, documentary, online, print, digital, and media outlets.

☀ **Parent/Legal Guardian Initials** \_\_\_\_\_

## Certification of Information Provided

To the best of my knowledge and belief, all the information set forth within this application is complete, true, and correct. All the entities participating in the program will rely on the information contained herein to make a decision as to whether or not this participant may safely complete the activities required to participate in Grand Canyon Youth. Participants younger than 18 years must have a parent or legal guardian signature. Grand Canyon Youth reserves the right, in its absolute discretion, to terminate this program or anyone's participation in the program, at any time, for any reason, including but not limited to any participant's failure to comply with any application requirements or administrator's directives. I have read this application in its entirety and fully understand and agree to the terms and information within.

☀ \_\_\_\_\_  
**Parent/Legal Guardian Signature** \_\_\_\_\_  
**Date**

☀ \_\_\_\_\_  
**Participant Signature** \_\_\_\_\_  
**Date**



## Financial Aid Request Form

Grand Canyon Youth, along with our donors, are proud to offer Financial Aid to youth who demonstrate financial or compelling need. We do not want the price of the program to be a limiting factor in participation. The intent of this form is to open a dialog between parents/guardians and youth about setting and working towards fundraising goals, as well as asking for assistance when needed. Because funds are limited, please ask only for what you need, so we may widely distribute available aid.

### Request Process

1. Turn in this form, along with the participant essays and a \$30 deposit. Your deposit is applied to the overall trip price.
2. GCY will process your request and email you a financial aid award letter with level of financial support.
3. After your trip, write a thank you letter addressed to “sponsor” and mail it to Grand Canyon Youth. Please share a story of your experience in the letter. Failure to write a thank you may prohibit you from receiving Financial Aid for future GCY programs.

### Required Youth Short Answer Questions

We will determine your financial aid award based on the content of your responses and financial information provided. Be thoughtful, honest, and thorough in your responses. Answer all of the following questions to the best of your ability on a separate sheet(s) of paper. **All questions have a 150-word minimum.**

1. Please tell us about extenuating or compelling circumstances that demonstrate your financial need.
2. What are your most treasured skills or talents? How do you share those with others and how would they help you on this GCY program?



# Financial Aid Request Form

Participant Name: \_\_\_\_\_

## Parent & Youth Collaborative Questions

Help Grand Canyon Youth understand the amount you are requesting within the context of your fundraising goal. Please consider the amount of money you think you will be able to raise with the support of family. Use the following section to workshop your preferred payment scenario. Please **fill in each line**, even if the answer is \$0. All of the responses you fill in combined should add up to the total price of your GCY program.

- 1. \$30 Deposit, included with this Form \$ 30
  - 2. Parents/Guardians contribution \$ \_\_\_\_\_
  - 3. Participant will fundraise/earn \$ \_\_\_\_\_
  - 4. We are requesting this amount in financial aid \$ \_\_\_\_\_
- 
- Total Price of GCY Program \$ 60**

## Parent/ Legal Guardian Questions

- 1. What is your Household Gross Annual Income: \$ \_\_\_\_\_/year
  - a. How many adults contribute to this income? \_\_\_\_\_
  - b. Total number in household: \_\_\_\_\_
- 2. Has your youth participated in a Grand Canyon Youth Program in the past? **Yes No**
  - a. If yes, did you receive Financial Aid? **Yes No**
- 3. Does your family qualify for free & reduced lunch? **Yes No**

**I hereby certify that the information is accurate and complete. Please consider us for financial assistance. I am requesting only what we need and I understand that funds are limited.**

☀ Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☀ Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_