GENERAL ADMISSIO	N TOUR (Kennedy and GWB)	
Type of group:		
Select:	School	
	Church	
	Civic	
	Tour Group	
	Other	
Has your group visite		
Select:	Yes No	
Mailing Address: (Cit		
Fill in the		
Daytime Phone Num		
Fill in the Type of tickets reque		
	blan Adult	
Till ill tile	Senior (62+)	
	Youth (13 - 17)	
	Children (5 - 12)	
	Child (5 - 12)	
	Infant	
	Military (Retired)	
	Military (Veteran)	
	Military (Active Duty)	
	(Insert Affilliated University Name)	Student Faculty and Staff
o	College Student (Non-Insert Affilliat	ed Offiversity Name;
Questions or comme		
Fill in the	DIANK	
EDUCATION TOUR /	SITUATION ROOM EXPERIENCE / BUS SC	HOLARSHIP REQUEST (Kennedy, Reagan and GWB)
Confirm number par	rticipants and chaperones:	
Fill in the	blan Pre-K	
	Kindergarten	
	1st - 5th grade	
	6th - 8th grade	
	9th grade	
	10th grade	
	11th grade	
	12th grade	
	Undergraduate	
	Graduate	
	Educator	
	Chaperone	
	Parent	
	Adult	
	Participants	
Date of visit? Select		
ا What time will parti Fill in the		perience? The Situation Room Experience is two and a half full hours. Please plan to spend at least THREE HOURS in the simulation.
		perience? The Situation Room Experience is three full hours (half-day). Please plan to spend at least FOUR HOURS in the simulation.
Fill in the	blank:	
What time will stude	ents arrive? Select time:	
	the contract of the contract o	
vvnat ume wili parti	cipants arrive? Select time:	
Self-guided Presiden	ntial Library Tour	
Check the		
Docent-led Presiden		
Check the		
Select:	Museum	
55.554	Special Exhibit	

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Park
Guided-School Program
         Check the box
Museum-Educator Program
         Check the box
Transportation to museum:
          Select:
                       Bus
                       Car
                       Bus and Car
Will you need a bus scholarship?
         Select:
We are happy to offer financial assistance. Will you be requesting funding?
         Select:
                      Yes
Actual bus cost estimate:
         Fill in the blank
Statement of financial need from the school principal:
         Essay response
Teacher signature:
         Sign and Date
Principal signature:
         Sign and Date
Lunch plans:
         Select:
                       Bring Sack-Lunches
                       No Lunch
                       Pre-order Box Lunches
                       Cater-in
Executive lunch plans:
         Select:
                       No Lunch
                       Pre-order Box Lunches
                       Café & Pub
                       Buffet
On-site contact name: (first and last)
         Fill in the blank
On-site contact cell:
         Fill in the blank
On-site contact e-mail:
         Fill in the blank
Independent home school:
          Select:
                      Yes
Region:
         Fill in the blank
School district:
         Fill in the blank
Type of school:
         Select:
                       Charter
                       Private
                       Public
                       Other
Organization name:
         Fill in the blank
Organization address: (street number and name, city, state, and zip code)
         Fill in the blank
Organization website:
         Fill in the blank
Principal or head of organization name: (first and last)
         Fill in the blank
Principal or head of organization direct number:
         Fill in the blank
Principal or head of organization e-mail address:
```

Fill in the blank Is there anything special we should know about your group? Fill in the blank Do you need meeting space? Select: Yes Field trip confirmation number: Fill in the blank Agenda Fill in the blank Pre-packet sent Check the box Representative submitted signed policy and use agreement. Check the box RESEARCH PROGRAM QUESTIONS (NYC) Date of visit: Fill in the blan 1st choice: ___ 2nd choice: _____ 3rd choice: ____ Expected time of arrival? Fill in the blank Duration of visit: Fill in the blank Number of students: Fill in the blank Number of educators and chaperones: Fill in the blank Grade level: Fill in the blank Type of class: (history, research, civics, language arts, other) Fill in the blank Location of program: Select: On-site Off-site Topic selection: Select: Immigration World War II The Bill of Rights Inventions Desegregation Genealogy Civil Rights The New Deal Women's Rights Copyright Court Cases Labor Prohibition Cold War **Great Depression** Maritime Photographs Civil War The Constitution Disaster at Sea That's Entertainment Other _ ame: Fill in the blank

Teacher	's na Fi
School n	

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Fill in the blank
Street address:
          Fill in the blank
City:
          Fill in the blank
State:
          Fill in the blank
Zip code:
          Fill in the blank
E-mail:
          Fill in the blank
School phone number:
          Fill in the blank
Cell phone to reach you if needed the day of the visit:
         Fill in the blank
Would you like to receive the Education Updates Blog from the National Archives?
                    Yes No
          Select:
TRAVELING TRUNK PROGRAM (Reagan and GWB)
Traveling Trunks may be rented for 2 week or 4 weeks by an educator, administrator, or school district:
          Select:
                       One week
                       Two Weeks
                       Four Weeks
Pick-up or ship:
                       Pick-up
          Select:
                       Ship
Payment method:
          Select:
                       Check
                       Credit Card
Payment information (name,credit card number, expiration date, security code, account number, routing number)
          Fill in the blank
Billing address: (street number and name, city, state, and zip code)
         Fill in the blank
Shipping address: (street number and name, city, state, and zip code)
         Fill in the blank
EDUCATOR WORKSHOP QUESTIONS (Reagan)
Can you attend?
          Select:
                       Yes, I'll be No, I cannot attend
Full name:
          Fill in the blank
First name:
          Fill in the blank
Last name:
          Fill in the blank
E-mail address:
          Fill in the blank
Phone number:
          Fill in the blank
How many persons will attend?
         Fill in the blank
What company or school are you associated with?
          Fill in the blank
What is the name of the school or organization where you teach?
          Fill in the blank
If you are an educator, what grade levels do you teach?
         Fill in the blank
How did you hear about this event?
         Fill in the blank
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FILM THIS! QUESTIONS (Reagan) (ages 14 - 19) Student Name Fill in the blank I am interested in attending: Session A Select: Session B Paid or Scholarship Paid Select: Scholarship Student email Fill in the blank Parent email Fill in the blank Parent Signature Sign and Date Student Signature Sign and Date Write one paragraph explaining why you would like to participate in the Reagan Student Media Seminar. Essay response Write one paragraph describing your experience with film and media. Describe your reasons for needing financial assistance. Essay response How much of the amount are you able to pay? Essay response Which session would you prefer? Essay response ONLINE / DISTANCE LEARNING QUESTIONS (Reagan) What are the names of people attending webinar? Fill in the blank What is your school name and field trip date? Fill in the blank Which session date do you plan to attend? Date is selected from a drop down menu of options. What is your email address? Fill in the blank PROFESSIONAL DEVELOPMENT WEBINAR (LO including Archives 1, New York, College Park) Teacher Name Fill in the blank Title Fill in the blank Phone Number Fill in the blank Education Institution/Organization Name Fill in the blank City Fill in the blank State Fill in the blank Select a Webinar An Introduction to DocsTeach: Discover DocsTeach.org, the online tool for teaching with documents from the National Archives. Teaching the Charters of Freedom: Join the National Archives for a hands-on session and discover resources for teaching the founding documents of the United States. Fill in the blank from a menu of rotating webinars Select a Time Zone (for by-request webinars only) Alaska Standard Time Atlantic Standard Time

Central Standard Time Eastern Standard Time Hawaiin-Aleutian Standard Time Mountain Standard Time Pacific Standard Time Preferred Date 1 (for by-request webinars only) Fill in the blank Preferred Time 1 Fill in the blank Preferred Date 2 (for by-request webinars only) Fill in the blank Preferred Time 2 Fill in the blank Preferred Date 3 (for by-request webinars only) Fill in the blank Preferred Time 3 Fill in the blank Number of Participants Fill in the blank Occupation Fill in the blank Grade Level Fill in the blank Special Accommodations Select: Yes Space to write in any special accommodations. Comment or Questions Space to write in any comments or questions. Connect with the National Archives Would you like to receive emails about new teaching tools, lesson plans, online activities, field trips, professional development, and primary sources our Education Updates Blog? Would you like to receive emails about upcoming education programs? Select: Yes No K-12 DISTANCE LEARNING PROGRAMS (LO including A1 and New York) Teacher Name Fill in the blank Title Fill in the blank Phone Number Fill in the blank **Email Address** Fill in the blank School Name Fill in the blank Address 1 Fill in the blank Address 2 Fill in the blank City Fill in the blank State Fill in the blank Zip Fill in the blank Select an Elementary School Distance Learning Program (K-2) Our Classroom Bill of Rights (K-2) What Happens in Washington? (3-5) The Charters of Freedom: Building a More Perfect Union

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(3-5) Superhero Bill of Rights
         (3-5) Rightfully Hers: American Women and the Vote
         (4-5) The Constitution at Work: Elementary School Edition
Select a Middle School Distance Learning Program
         (6-8) The Charters of Freedom: Building a More Perfect Union
         (6-8) Decoding the Declaration
         (6-8) The Constitution at Work: Middle School Edition
         (6-8) The Bill of Rights in Real Life
         (6-8) Rightfully Hers: American Women and the Vote
Select a High School Distance Learning Program
         (9-12) The Charters of Freedom: Building a More Perfect Union
         (9-12) Decoding the Declaration
         (9-12) Know Your Rights
         (9-12) Rightfully Hers: American Women and the Vote
Select a Time Zone
         Alaska Standard Time
          Atlantic Standard Time
          Central Standard Time
         Eastern Standard Time
         Hawaiin-Aleutian Standard Time
         Mountain Standard Time
         Pacific Standard Time
Preferred Date 1
         Fill in the blank
Preferred Time 1
         Fill in the blank
Preferred Date 2
         Fill in the blank
Preferred Time 2
         Fill in the blank
Preferred Date 3
         Fill in the blank
Preferred Time 3
         Fill in the blank
Connection Preference
         Select:
                      I would like the Nation Archives to provide a web conferencing link for the program
                       I can provide a web conferencing link for the program
Number of Participants
         Fill in the blank
Number of Students
         Fill in the blank
Grade Level
          Select:
                       10
                       11
                       12
Type of Class (U.S. History, Civics, Language Arts, etc.)
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Fill in the blank

Special Accommadations
Select: Yes No
Space to write in any special accommadations.
Comment or Questions
Space to write in any comments or questions.
The National Archives requires that the requesting educator or another educator from your institution be present during the student distance learning program to observe the session and support classroom management. The National Archives cannot fulfill program requests for non-supervised sessions.
I confirm that I have read, understand, and agree to the above statement. Select: Yes No
Scied. It's No
Would you like to receive emails about new teaching tools, lesson plans, online activities, field trips, professional development, and primary sources our Education Updates Blog?
Select: Yes No
Would you like to receive emails about upcoming education programs?
Select: Yes No
LEARNING LAB REGISTRATION (ARCHIVES 1)
Teacher's Name
Fill in the blank
Title
Fill in the blank Email
Fill in the blank
Phone Number
Fill in the blank
Cell Phone Number (Required for Day of Visit)
Fill in the blank
School Name
Fill in the blank
Address 1
Fill in the blank
Address 2
Fill in the blank
City Fill in the blank
State
Fill in the blank
Zip
Fill in the blank
Preferred Date 1
Fill in the blank
Select a Program Time and Time 1
Select: The Charters of Freedom: Building a More Perfect Union
The Constitution Lab: Explore how the actions of the Federal Government are based on the Constitution (Grades 6-12)
Preferred Date 2 Fill in the blank
Select a Program Time and Time 2
See options to select from under: Select a Program Time and Time 1
Preferred Date 3
Fill in the blank
Select a Program Time and Time 3
See options to select from under: Select a Program Time and Time 1
Number of Students
Fill in the blank
Number of Teachers And Other Chaperones (We ask that there be 1 chaperone for every 10 students)
Fill in the blank
Grade Level (Programs are available for grades K-12)
Select: 3
μ

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10
                     11
                     12
Type of Class (U.S. History, Civics, Language Arts, etc.)
         Fill in the blank
Special Needs Accommodations
         Select:
                     Yes No
         Space to write in any special accommadations.
Enter your comments or questions here
         space to write in comments or questions
Would you like to receive emails about new teaching tools, lesson plans, online activities, field trips, professional development, and primary sources our Education Updates Blog?
Would you like to receive emails about upcoming education programs at the National Archives?
         Select: Yes No
NATIONAL ARCHIVES PAJAMA PARTY (LO)
Parent/Guardian Last Name
         Fill in the blank
Paren/Guardian First Name
         Fill in the Blank
Preferred email address
         Fill in the blank
Last name of the child you are registering
         Fill in the blank
First name of the child you are registering
         Fill in the blank
If you are registering additional children, please enter their names here.
         Fill in the blank
City
         Fill in the blank
State
         Fill in the blank
Zip Code
         Fill in the blank
Is this the first time your family has participated in a National Archives education program? *
         Select:
                   Yes No Not sure
How did you find out about this program? Please check all that apply.
         Select: E-mail from the National Archives or the National Archives Foundation
                     National Archives Social Media (Facebook, Instagram, Twitter)
                     Other Social Media
                     Through a friend/family member
Would you like to receive emails about upcoming National Archives education programs? *
         Select:
                     Yes No Not sure
GROUP TOUR AND FIELD TRIP RESERVATIONS (LBJ)
         Group Type
Are you a:
         Select:
                     Pre-K-12 Group
                     College/University Group
                      General Group
         [Pre-K-12] Tell Us About Your Visit
                     Name of School or Group
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Fill in the blank

Name of Tour Company (if applicable) Fill in the blank Preferred Visit Date Fill in the blank Alternative Visit Date Fill in the blank If you are planning to visit over the course of multiple days, please indicate below. Number of Students (15 minimum, 60 maximum) Fill in the blank Grade Level(s) Fill in the blank Ages of Students Fill in the blank Number of School Staff. Please include bus driver(s) and/or coordinator. Fill in the blank Number of Other Adult Chaperones Fill in the blank How would you like to spend your time at the library? (?) Our immersive classroom experiences take place in the Lady Bird Education Center, located on the second floor of the LBJ Library. Each experience is hands-on giving students the opportunity to work with our primary resources from our archives or with artifacts from our museum collection. Guided tour, no immersive classroom experience Preferred Start Time Select: 9:30 a.m. 11:30 a.m. 1:30 p.m. 2:30 p.m. Alternative Start Time Fill in the blank Preferred Length of Tour (Min. time: 60 minutes, Typical tour is 90 minutes) Fill in the blank Guided tour with immersive classroom experience Preferred Start Time Select: 9:30 a.m. 11:30 a.m. 1:30 p.m. Which immersive classroom experience would you like to participate in? A tour is included with each experience. Note(s): 1) The tour portion of your visit is self-guided. The classroom experience is facilitated and led by an LBJ Library Education Specialist. 2) Please visit our Education page to learn more about each of our experiences. The Spy's Dilemma/LBJ and the Cold War Program and Tour (2.5-3 hours) Dropdown: Vietnam: A Presidential Decision Program and Tour (3-4 hours) A Civil Rights Investigation: Mississippi Burning Program and Tour (1-1.5 hours) A Matter of Civil Rights Program and Tour (2 hours) Great Society Program and Tour (2-3 hours) Election Collection Program and Tour (2-2.5 hours) Election Collection Program and Tour (2-2.5 hours) Self-guided tour, no immersive classroom experience Preferred Start Time Please select a time between 9:30 a.m.-3:30 p.m. Fill in the blank Alternative Start Time Fill in the blank Preferred Length of Tour (Min. time: 60 minutes, Typical tour is 90 minutes) Fill in the blank Self-guided tour with immersive classroom experience Preferred Start Time Please select a time between 9:30 a.m.-3:30 p.m. Fill in the blank Which immersive classroom experience would you like to participate in? A tour is included with each experience. Please visit our Education page to learn more about each of our experiences. Self-guided tour with immersive classroom experience Dropdown: The Spy's Dilemma/LBJ and the Cold War Program and Tour (2.5-3 hours) Vietnam: A Presidential Decision Program and Tour (3-4 hours) A Civil Rights Investigation: Mississippi Burning Program and Tour (1-1.5 hours) A Matter of Civil Rights Program and Tour (2 hours)

Great Society Program and Tour (2-3 hours) Election Collection Program and Tour (2-2.5 hours)

Election Collection Program and Tour (2-2.5 hours)

College/University Group Name of School or Group Fill in the blank Name of Tour Company (if applicable) Fill in the blank Preferred Visit Date Fill in the blank Alternative Visit Date Fill in the blank If you are planning to visit over the course of multiple days, please indicate below. Fill in the blank Number of Students (60 maximum) Fill in the blank Number of faculty/staff and bus driver(s) Fill in the blank How would you like to spend your time at the library? Immersive classroom experience only, no tour Which immersive classroom experience would you like to participate in?Please visit our Education page to learn more about each of our experiences. Vietnam: A Presidential Decision Program and Tour (3-4 hours) A Civil Rights Investigation: Mississippi Burning Program and Tour (1-1.5 hours) A Matter of Civil Rights Program and Tour (2 hours) Great Society Program and Tour (2-3 hours) Election Collection Program and Tour (2-2.5 hours) Introduction to Holdings and Tour (2 - 3 hours) Guided tour, no immersive classroom experience Preferred Tour Start Time Select: 9:30 a.m. 11:30 a.m. 1:30 p.m. 2:30 p.m. Alternative Start Time Fill in the blank Preferred Length of Tour (typical tour is 90 minutes) Fill in the blank Guided tour, with immersive classroom experience Preferred Tour Start Time Select: 9:30 a.m. 11:30 a.m. 1:30 p.m. Which immersive classroom experience would you like to participate in? Please visit our Education page to learn more about each of our experiences. Vietnam: A Presidential Decision Program and Tour (3-4 hours) A Civil Rights Investigation: Mississippi Burning Program and Tour (1-1.5 hours) A Matter of Civil Rights Program and Tour (2 hours) Great Society Program and Tour (2-3 hours) Election Collection Program and Tour (2-2.5 hours) Introduction to Holdings and Tour (2 - 3 hours) Self-guided tour, no immersive classroom experience Preferred Start Time Please select a time between 9:30 a.m.-3 p.m. Fill in the blank Alternative Start Time Fill in the blank Preferred Length of Tour (typical tour is 90 minutes) Fill in the blank Self-guided tour with immersive classroom experience Preferred Start Time Please select a time between 9:30 a.m.-3 p.m.

> Which immersive classroom experience would you like to participate in? A tour is included with each experience. Note(s): 1) The tour portion of your visit is self-guided. The classroom experience is facilitated and led by an LBJ Library Education Specialist. 2) Please visit our Education page to learn more about each of our experiences. Vietnam: A Presidential Decision Program and Tour (3-4 hours) A Dropdown:

Civil Rights Investigation: Mississippi Burning Program and Tour (1-1.5 hours)

Fill in the blank

A Matter of Civil Rights Program and Tour (2 hours)

Great Society Program and Tour (2-3 hours) Election Collection Program and Tour (2-2.5 hours) Introduction to Holdings and Tour (2 - 3 hours)

Conoral Group	or Contact Information
	ame of Group
IN	·
N	Fill in the blank
IN	ame of Tour Company (if applicable)
_	Fill in the blank
Р	Visit Date
	Fill in the blank
A	Iternative Visit Date
	Fill in the blank
If	you are planning to visit over the course of multiple days, please indicate below.
	Fill in the blank
	riendly reminder: We do not offer guided tours for non-school groups. For more information, please contact the Volunteer and Visitor Services Office at (512) 721-0184.
V	/hat is your preferred start time?Self-guided tours are available between 9:30 a.m3:30 p.m.
	Fill in the blank
_	Fill in the blank
Р	referred Length of Tour (Min. time: 60 minutes, Typical tour is 90 minutes)
	Fill in the blank
Tell us about yo	
	efficiently check you in on your day of visit.
N	umber of Tour Director(s) or Group Leader(s) and Bus Driver(s) (Free admission)
	Fill in the blank
N	umber of Adults (Admission \$7)
	Fill in the blank
N	umber of Seniors (Admission \$5)
	Fill in the blank
N	umber of Youth (13-17) (Admission \$3)
	Fill in the blank
N	umber of Children (12 and under) (Free admission)
	Fill in the blank
N	umber of Non-UT Austin College/University Students (Admission \$3)
	Fill in the blank
N	umber of UT Austin Students, Staff, and Faculty (Free admission)
	Fill in the blank
N	umber of Active Duty Military (Free admission)
	Fill in the blank
N	umber of Former Military (Admission \$5)
	Fill in the blank
N	umber of LBJ Library Members and Other NARA Presidential Library Members (Free admission)
	Fill in the blank
Μ.	fain Contact First Name
	Fill in the blank
Μ.	1ain Contact Last Name
	Fill in the blank
Μ.	fain Contact Person Title:
	Fill in the blank
E	mail Address
	Fill in the blank
P	hone Number (Direct line or cell phone preferred)
	(xxxx) xxxx-xxxx
St	treet Address
	Fill in the blank
А	ddress Line 2
	Fill in the blank
С	ity
	, Fill in the blank

State

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Drop down list of every U.S. state
                       Zip Code
                                Fill in the blank
                       On the day of your visit, will there be a different point of contact?
                                 Select: Yes No
                       Day-of Contact First Name:
                                Fill in the blank
                       Day-of Contact Last Name: Day-of Contact Email Address
                                Fill in the blank
                       Day-of Contact Phone Number (Cell phone preferred)
                                Fill in the blank
          Additional Information
                       Additional CommentsInclude any specific day-of needs, ADA accommodations, or more
                       If you have been in touch with a specific LBJ Library contact, please include their name below:
                                Fill in the blank
                       Would your group like to visit our museum storeâ€"The Store at LBJ?
                                Select: Yes No
LIBRARY QUESTIONS (Kennedy)
Have you ever visited the museum?
         Fill in the blank
Have you brought students for a guided program? (Which one?)
         Fill in the blank
How did you learn about this program?
         Fill in the blank
Will you (briefly) indicate how the visit relates to your school curriculum?
         Fill in the blank
Confirm number participants and chaperones:
         Fill in the blan Pre-K ___
                       K - 2nd ____
                      3rd - 5th grade _____
                       6th - 8th grade _____
                       9th grade _____
                       10th grade _____
                      11th grade ____
                      12th grade _____
                       Undergraduate _____
                      Graduate _____
                      Educator _____
                      Chaperone _____
                       Parent_
                       Adult __
                       Participants
We are happy to work with you to provide reasonable accommodations for students. Please let us know how we can support you.
         Fill in the blank
4/8/2022 - Questions to be cleared for na-2026inst
Type of program
         Onsite
         Distance learning
Will you recommend this program to other educators (167)?
          Yes
          No
         Why or why not?
                       Fill in the blank
What did you like best about the program?
         Fill in the blank
Did you share any of the pre- or post- program activities with your students?
          Yes
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No
         If yes, which activities did you use?
Does this program meet any district-wide objectives?
         Yes
         No
 What types of civic education resources are you most interested in from the National Archives? (rank level of interest)
         Distance learning programs
                      Extremely interested
                      Very interested
                       Somewhat interested
                       Not so interested
                       Not at all interested
         Onsite field trip programs at National Archives and Presidential Library sites
                      Extremely interested
                      Very interested
                       Somewhat interested
                       Not so interested
                       Not at all interested
         Lesson plans
                       Extremely interested
                       Very interested
                       Somewhat interested
                       Not so interested
                       Not at all interested
         Online teaching activities on DocsTeach.org
                      Extremely interested
                       Very interested
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		,
		newhat interested
	Not	t so interested
	Not	t at all interested
	Videos	
	Exti	remely interested
	Ver	y interested
	Son	newhat interested
	Not	t so interested
	Not	t at all interested
	Online primary so	urces
	Exti	remely interested
	Ver	y interested
	Son	newhat interested
	Not	t so interested
	Not	t at all interested
	Other (please spe	cify)
	Fill	in the blank
Participat	ting in this program	has increased my confidence in teaching with primary
	Strongly Agree	
	Agree	
	Disagree	
	Strongly Disagree	
Participat	ting in this program	will help me improve students' civic knowledge and skills.
	Strongly Agree	
	Agree	
	Disagree	
	Strongly Disagree	

Commercial Account Request (Recreation.g

Organization name:

Fill in the blank

Organization address: (street number and name, cit

Fill in the blank

Principal or head of organization name: (first and la

Fill in the blank

Principal or head of organization direct number:

Fill in the blank

Principal or head of organization e-mail address:

Fill in the blank

Representative acknowledges receipt of museum vi

Check the box

Business License Number

Fill in the blank

Expiration Date

Fill in the blank

OV))

:y, state, and zip code)

st)

isitor policy and accepts responsibility for their clients while onsite.

Minor's Name

Minor's Age

Name

Date

Parent or Legal Guardian Name Printed

Parent or Legal Gurdain Signature

Parent of Legal Guardian DOB

Address

Phone

Cell

City

State

Zip