Student Information

Please print or type.

You will not be eligible to participate in Youth Tour activities until these forms have been filled out in their entirety and returned to your sponsoring cooperative for submission to PREA. Return this completed form to Sussex Rural Electric Cooperative by sending it to info@sussexrec.com or 64 County Route 639, Sussex, NJ 07461.

PREA and NRECA collect the following information to provide first aid and other medical treatments for students participating in Youth Tour and Youth Leadership Council. We reserve the right to refuse participation by your child if the information is not provided. The information collected will be kept by PREA and NRECA staff and will only be provided to medical staff in the case of an accident or emergency. This information is not shared or used for any other purpose. Some of the information contained in the form will be deemed a personal health record and, therefore, protected in accordance with certain federal requirements in addition to PREA's and NRECA's privacy policy.

un Name.		
lame (as you want it to appear on	your name badge):	
ull Address:		
lome Phone:	Cellphone:	
our Email Address:		
Sex: Age:	Date of Birth:	T-Shirt Size:
Congressional Representative:		
	names of your natural parents, steppa	rents, and/or legal guardians
Parent 1:	Cellphone:	
	Cellphone: Work Phone:	
Home Phone:		
Home Phone:	Work Phone:	
Home Phone: Parent 2: Home Phone:	Work Phone:	
Home Phone: Parent 2: Home Phone: Parent 3:	Work Phone:Cellphone:Work Phone:	
Home Phone: Parent 2: Home Phone: Parent 3: Home Phone:	Work Phone:Cellphone:Work Phone:Cellphone:	
Home Phone: Parent 2: Home Phone: Parent 3: Home Phone:	Work Phone:Cellphone:Work Phone:Cellphone:Work Phone:Cellphone:	
Home Phone: Parent 2: Home Phone: Parent 3: Home Phone: Parent 4:	Work Phone:	

S	chool Ir	nformation	
High School:			
School Address:			
Grade Point Average: M			
Career Goal:			
List activities you have participated such as class officer, plays, music, a	in and any sp	ecial honors you have received d	uring high school
Activity	Years	Remarks	
	_		
Please list any public-speaking expe	erience you m	ay have:	
List extracurricular activities and year and service clubs, etc.:	ars of involve	ment, including 4-H, church, com	munity,
Activity	Years	Remarks	
List any other activities, special inte	rests or hobb	ies:	
List your local newspapers (dailies a	ind weeklies)	names, addresses and websites:	

YOUTH TOUR – Consent for Medical Treatment

READ THIS FORM COMPLETELY AND CAREFULLY AS THIS DOCUMENT IMPACTS IMPORTANT LEGAL RIGHTS.

I/We the undersigned parent(s) or guardian(s) of	(vouth's full name)
give my/our consent for my/our child to participate	
I/We understand that this participation involves tr	avel within and outside Pennsylvania and New Jersey.
my/our child. I/We further request and authorize I secure any medical or other emergency services	and volunteer chaperones, to direct and supervise PREA, through its staff and volunteer chaperones, to the said staff and volunteer chaperones in their esirable for my/our child during their participation in
	medical care and treatment when necessary, I/we providing medical care to our child in reliance of this ptance of my/our substitute caregiver's consent.
Please provide the name and phone number of the	he best person to contact in the event of an emergency
Name:	Relationship to Student:
Emergency Phone Number:	
Parent/Guardian's Signature	Parent 2/Guardian's Signature (Optional)
(Date)	(Date)
State of	
County of	
Signed (or attested) before me on	(date)
by	
(name(s) of individual(s))	
Signature of notarial officer	
Stamp	
My commission expires:	

Medical Information

Please list any chronic or temporary medical conditions (such as epilepsy, diabetes, etc.) the tour director and chaperones should be aware of. Do you have any of the following:

Asthma	Yes	No	
Bleeding problems	Yes	No	
Convulsions/seizures	Yes	No	
Depression disorder	Yes	No	
Diabetes	Yes	No	
Epilepsy	Yes	No	
Heart murmur/heart disease	Yes	No	
High blood pressure	Yes	No	
Respiratory problems	Yes	No	
Sleep walking	Yes	No	
List all other medical conditions:			
Diagon list all allergies.			
Please list all allergies:			
Date of last tetanus shot: Blood Type:			
			esages of medications you take regularly, at would be needed for the trip (e.g.,
	Insura	ance Da	ata
Note: This information is required for	or the Accident	al Insurance	Coverage.
(Full Name of Insured Youth)			
(Full Name of Beneficiary)		(Rela	tionship to Insured Youth)

(City & State)

(ZIP Code)

(Address of Beneficiary)

YOUTH TOUR – Consent for Liability and Publicity Release Form

READ THIS FORM COMPLETELY AND CAREFULLY AS THIS DOCUMENT IMPACTS IMPORTANT LEGAL RIGHTS.

I/We the undersigned parent(s) or guardian(s) of	(youth's full name)
give my/our consent for him/her to participate in Youth T Saturday, June 21, 2025, sponsored by the Pennsylvani	
I/We understand that this participation involves travel with	thin and outside Pennsylvania and New Jersey.
I/We hereby release and agree to hold harmless PREA, associated organizations together with their heirs, succe action, claims, damages, costs, expenses, compensation loss or injury related to participation by my/our son/daug Cooperative Youth Tour.	ssors, or assigns from any and all causes of n, personal injury, property loss, or any other
I/We hereby grant permission to PREA to use photograp of my/our son/daughter for publicity purposes related to	
Parent/Guardian's Signature	Parent 2/Guardian's Signature (Optional)
Date	Date

YOUTH LEADERSHIP CONFERENCE – Consent for Medical Treatment, Liability and Publicity Release

READ THIS FORM COMPLETELY AND CAREFULLY AS THIS DOCUMENT IMPACTS IMPORTANT LEGAL RIGHTS.

I/We the undersigned parent(s) or guardian(s) of	
invertic undersigned parent(s) or guardian(s) or	(youth's full name)
give my/our consent for him/her to participate in the Youth through March 31, 2026, sponsored by the National Rural I/We understand that this participation involves travel withitimes my/our son/daughter may be traveling and/or participation of a chaperone.	Electric Cooperative Association (NRECA). n and outside, and that at (your state)
I/We authorize and direct NRECA, through its staff and vol my/our son/daughter. I/We further request and authorize N chaperones, to secure any medical or other emergency se chaperones in their reasonable discretion may deem nece during his/her participation in the Youth Leadership Confer	IRECA, through its staff and volunteer ervices the said staff and volunteer ssary or desirable for my/our son/daughter
I/We hereby release and agree to hold harmless NRECA, organizations together with their heirs, successors, or assi damages, costs, expenses, compensation, personal injury related to participation by my/our son/daughter during his/l Conference.	gns from any and all causes of action, claims, , property loss, or any other loss or injury
I/We hereby grant permission to NRECA to use photograp of my/our son/daughter for publicity purposes related to this	
Parent/Guardian's Signature Pa	arent 2/Guardian's Signature (Optional)
Date Date	ate

Social Media Contract for Youth Tour Participants

oocial Media oontract for	Touth Tour Farticipants
Name:	Cooperative:
Social media, such as Facebook, X (formerly personal texting, and others, are powerful too impact on your personal reputation as well as representing, the Pennsylvania Rural Electric Electric Cooperative Association (NRECA).	ols of communication that can have significant the reputations of the cooperative you are
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you think the information will disappear attached can last a lifetime. Consider with known and how that may reflect on you friends, the reputation of your cooperation information you place online could jeon a job years after Youth Tour. • Always be authentic. Be honest about Youth Tour hashtag, make sure you ar cooperative, PREA and NRECA Youth • When posting on social media while or disingenuous, inappropriate or offensive. • Never pretend to be someone else who representative. • Be respectful and thoughtful. Youth To and dignity for all people and to the civil Treat others the way you would like the Know the rules. Become familiar with the media sites and networks in which you required for responsible online communications.	n Youth Tour, you will not be disrespectful, ye. en you post personally or as a Youth Tour our participants are committed to showing respect yil and thoughtful discussion of opposing ideas. em to treat you on social media sites. the terms of service and policies of the social oparticipate and the appropriate code of ethics
be required to remove all posts in question from	social media sites, including electronic text, may om social media sites, be required to show tour be sent home at the expense of their parent(s), a appropriate or required based on the
These guidelines and rules are non-negotiable degree of misuse of social media.	le and the consequences are dependent on the
Parent Signature(s)	Date:
Student Signature	Date:

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Rules/Guidelines Contract for Youth Tour Participant
Name: Cooperative:
You were selected by your sponsoring cooperative to join the Pennsylvania/New Jersey Rural Electric Youth Tour because you have measured up to the highest standards of leadership and conduct. You will be serving as representatives of the National Rural Electric Cooperative Association (NRECA) and Pennsylvania Rural Electric Association (PREA) and its member cooperatives from the time you leave until the time you return from Washington, D.C. You have a responsibility to yourself, and to others, to conform willingly and cooperatively with our very reasonable expectations.
You, along with your parent/guardian, must read and sign this contract acknowledging the rules and guidelines as a cooperative representative, and a representative of PREA and NRECA on Youth Tour.
Please adhere to the following rules and guidelines while on Youth Tour.
 Be punctual. If possible, be a little ahead of time. Travel in groups of three or more. Talking/texting on a cellphone is discouraged during scheduled tour activities. You will be required to participate in all planned activities of the entire Youth Tour and may not be excused from such participation except for good and sufficient reason and approval of the tour director. You will be required to wear your name badge at all tour functions. You must be in your room at the Gaylord at times designated by the tour director. You are not to leave your room after this hour except with special permission of the tour director and/or chaperone and escorted by a chaperone. You are not permitted to leave the grounds of the Gaylord. You are expected to conduct yourself respectfully and professionally. If you see or hear something that compromises the safety of those attending Youth Tour or the integrity of the program, say something to the tour director or a chaperone.
If a violation is detected of the rules listed below , you are subject to immediate dismissal from the group and will be returned home at your family's personal expense:
 Alcoholic beverages, including beer and wine, are strictly prohibited on Youth Tour. Use of illegal drugs, as prohibited by federal law, is strictly prohibited on Youth Tour. No smoking, tobacco use or vaping is permitted on the tour. Criminal or illegal activities are forbidden and punishable by law. No harassment of any sort. You must strictly adhere to the terms of the social media contract. Male and female students are NEVER allowed to be in a hotel room together.
Infraction of these rules governing the conduct of Youth Tour will be considered as cause for reprimand or termination of your participation and you will be returned home at your family's personal expense.
These guidelines and rules are non-negotiable and the severity of the consequences are dependent on the degree of violation.
Parent Signature(s) Date:

Student Signature______Date:

Along with your application for 2025's Youth Tour, students must submit a 500-word essay, based on the following prompt:

Youth Tour is a trip that, since the 1950s, has provided the opportunity for high school students from rural areas to explore our nation's capital. On Youth Tour, students get to learn about the democratic process in Washington, D.C. Youth Tour students have the opportunity to make connections and potential lifelong friendships with peers from other parts of the country.

Many Youth Tour alumni credit the trip as a critical life moment for them that set them on their path to success in their education or career. In fact, Apple CEO Tim Cook has credited Youth Tour as his first experience visiting Washington, D.C. After Youth Tour, alumni also have access to exclusive scholarship opportunities.

Please write a 500-word-minimum essay on the following topic:

Think about your own life, your role in your community, and what you want for yourself in the future. What does the prospect of this free trip to Washington, D.C. mean to you? What are you most interested in seeing and experiencing, and how could this experience help you in your life journey as you grow into a young adult?

Please submit your 500-word-minimum essay answering the questions above, along with your completed application, to craffay@sussexrec.com by Friday, February 7th, 2025.

Following this, the next step in the selection process will involve interviews with student applicants. Essays and interviews are a major part of the Youth Tour selection process and help us determine our selection of 2025's Youth Leadership Council (YLC) student representative.

If you are chosen to attend 2025's Youth Tour, you will be required to attend a preliminary Youth Tour meeting at Sussex REC's office alongside a parent or guardian. This meeting will take place on **Monday**, **February 24**th.