

Have Fun! Learn how to start your own business!

CANDO The Apprentice

Youth Business Training Competition

JULY 20TH - 25TH, 2008

Space is limited so register today.

Location: CANDO located in Historic City Hall next to Jackalope Square, Douglas, WY
Price: \$50 per person – (*After scholarships are applied) Includes all meals, lodging & materials
Ages: 14-18 years

All applicants must submit a completed application and a letter of recommendation from someone other than a family member. ***Scholarships are available on a first-come, first-served basis.**

Full enrollment is due two weeks prior to camp.

Please Note: Space is limited to 10 students.

If you have any questions call CANDO, 307-358-2000, or log on to

www.candowyoming.com/The_Apprentice.htm

CANDO The Apprentice (Youth Business Training Competition) Pre-Enrollment Form

Please return this portion to CANDO to pre-enroll.

FULL ENROLLMENT REQUIRES PAYMENT OF \$50 DEPOSIT TO CANDO AND SUBMISSION OF YOUR LETTER OF RECOMMENDATION, AS REFERENCED ABOVE. You will be contacted with further details when your pre-enrollment form is received!

NAME: _____ AGE: _____

ADDRESS: _____

TELEPHONE NUMBER: _____ EMAIL: _____

CAMPER SIGNATURE DATE

PARENT/GUARDIAN SIGNATURE DAT

Please return this form to: 130 South Third
Street
Douglas, WY 82633
Phone: (307) 358-2000 Fax: (307)



CANDO HEALTH STATEMENT & MEDICAL RELEASE

To be filled out by parent or guardian prior to event. Attendee **MUST** bring this statement to registration.

Name _____ Address _____

City _____ Zip _____ Age _____

Male () Female ()

Parent (or Guardian) _____ Home Phone _____ Work Phone _____

If parents are not available in case of an emergency, notify:

Name _____ Home Phone _____ Work Phone _____

The student was last examined by a physician (give approximate date):

Month _____ Year _____

Did member have any of the following conditions within the past week? (Mark with X)

Sore Throat _____ Head Cold _____ Chest Cold _____ Diarrhea _____ Other _____

Has the member been exposed to communicable disease within the last two weeks?

Yes _____ No _____ Name of Disease _____

HEALTH HISTORY - The above attendee has:

Diabetes	_____	Mononucleosis	_____
Rheumatic Fever	_____	(within year)	_____
Allergies:		Hepatitis	_____
a. food	_____	Migraines	_____
b. respiratory	_____	Hypoglycemia	_____
(specify)			
c. medicines	_____		

Other diseases or details of above: _____

The physician has advised:

a. to limit physical exercise	No _____	Yes _____	Explain _____
b. to use a special diet	No _____	Yes _____	Explain _____
c. to take or use special medication	No _____	Yes _____	Explain _____

Date of birth (if under 21) _____

In my capacity as _____
(mother, father, guardian)

I hereby grant permission for _____ to receive emergency medical care as a

camper at CANDO The Apprentice (Youth Business Training) from _____ to _____
in the event such treatment is rendered, any charges will be at my expense.

Parent's Signature _____ Date _____

Participation Agreement for CANDO The Apprentice (Youth Business Training)

Dear Parent and Participant:

CANDO's The Apprentice is designed to teach Wyoming Youth how to start their own business in a fun, exciting learning environment. To insure a successful activity, the health, welfare, and participation of campers, the following expectations must be adhered to.

Youth from a variety of backgrounds and home situations participate in the CANDO The Apprentice (Youth Business Training) in Douglas, Wyoming. Because they represent Wyoming Youth, we want to be sure we have common expectations. Parent or guardian and attendee are to read and discuss the following expectations and sign the final agreement prior to participation.

1. Be a "good citizen" at all times: respect for others and the property of others is good citizenship. Campers should conduct themselves as intelligent, responsible, and sufficiently mature individuals at all times. Respect the rights of others (listen, hear speakers at assemblies and workshops, etc.).
2. Participate in all scheduled activities of the program. Adequate free time and sleep time have been planned for. Therefore, you should have time and energy for the scheduled activities on the program.
3. Campers are not to leave the event without consulting with both Camp Director and Camp Coordinator as well as informing the Lead Trainer.
4. Campers are to maintain "In Dorm" and "Quiet Hours" as assigned for the program.
5. Campers are expected to be prompt to all events, and in honoring "In Dorm" guidelines.
6. Campers are expected to wear their name badges to all camp events.
7. Use of, or possession of alcoholic beverages, tobacco products, drugs, or other controlled substances is prohibited at all CANDO Youth activities.
8. **Parents or guardian can contact CANDO staff at 307-358-2000 any time during the camps.**

Attendees and Parents are asked to review the above and sign the following agreement.

We understand that certain guidelines are necessary in order for all attendees to have an enjoyable and educational experience. We further understand that failure to abide by these guidelines will result in immediate dismissal from this event and/or a restriction of our participation in CANDO programs in the future. The CANDO staff member in charge of the event will have the right to send home any attendee who does not live up to the rules as stated above. That staff member may consult with Camp Director, Camp Coordinator, or Lead Trainer to determine what action is necessary.

We have read and understand the above expectations governing our participation in _____
We agree that these expectations are reasonable and will abide by them.

Parent or Guardian Signature _____ Date

Attendees' Signature _____ Date

STATEMENT OF ASSUMED RISK

CANDO recognizes its youth programs as a means of providing participants with educational experiences and activities which are designed to meet the needs and interest of young people, and enable the participants to learn skills, make friends, and develop self-confidence and self-reliance. Although CANDO sponsors these programs, volunteer supervisors from the local community will be utilized to organize and coordinate camp activities designed to teach the participants these skills. All new learning experiences can involve some risk of personal injury. It is the policy of CANDO that the parent/guardian of the young person understands the potential risks associated with their child's participation in the CANDO The Apprentice (Youth Business Training) and its activities.

I, the parent/guardian of a CANDO The Apprentice (Youth Business Training) participant, acknowledge that I understand the risks of my child's participation in these camps and its activities may include, but are not limited to, sprained muscles, broken bones, injury to other body parts or functions, death or serious bodily injury. I understand that the dangers and risks of participating in the CANDO The Apprentice (Youth Business Training), including travel and camp activities may result in not only serious injury, but in a serious impairment of my child's future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life.

Talent Video/Photo Release Form

Talent Name: _____

Project Title: CANDO The Apprentice (Youth Business Training)

I hereby consent for value received and without further consideration or compensation to the use (full or in part) of all videotapes taken of me and/or recordings made of my voice and/or written extraction, in whole or in part, of such recordings or musical performance for the purposes of illustration, broadcast, or distribution in any manner while attending the CANDO Youth Business Camp.

Talent's signature _____

Address _____ City _____

State _____ Zip code _____

Date: ____/____/____

If the subject is a minor under the laws of the state where modeling, acting, or performing is done:

Legal guardian _____

(sign/print name)

Address _____ City _____

State _____ Zip Code _____

Date: ____/____/____