



Request for Pen Pal/Youth Sponsorship

So...you're moving! Are you nervous? Scared? Excited? Would you like to talk with someone your age, with similar interests about what you can expect with you arrive? Let us know. Take a few minutes to complete the information below.

Name:	Age:	Grade:
Mailing Address:	Email Address:	
Home Phone	Cell Phone:	Parent's Work Phone:
What is your approximate arrival date:		

What do you like to do? Check next to any/all of the activities listed below that you like to do.

<input type="checkbox"/>	Arts and Crafts	<input type="checkbox"/>	Drama
<input type="checkbox"/>	Dance	<input type="checkbox"/>	Piano
<input type="checkbox"/>	Cooking	<input type="checkbox"/>	Write (poetry, stories, letters)
<input type="checkbox"/>	Skate – board or blade	<input type="checkbox"/>	Read
<input type="checkbox"/>	Computer (games, internet, etc.)	<input type="checkbox"/>	Hang out with friends and talk
<input type="checkbox"/>	Shopping	<input type="checkbox"/>	Movies
<input type="checkbox"/>	Water Sports	<input type="checkbox"/>	Team/School sports
<input type="checkbox"/>	Other:		

What type of music do you like to listen to?

What is your favorite movie?

What questions do you have about our youth center, schools, and the surrounding areas?

I give my consent for my child's name and contact information for the purpose of participating in the (installation name) Youth Sponsorship Program.

Parent signature

Date