



CAPITOL CITY GENTLEMEN (GENTS) YOUTH PROGRAM

EPSILON XI CHAPTER OMEGA PSI PHI FRATERNITY, INC.

THE CAPITOL CITY GENTLEMEN (GENTS) YOUTH PROGRAM IS A MENTORING PROGRAM DESIGNED AROUND THE FRATERNITY'S CARDINAL PRINCIPLES (MANHOOD, SCHOLARSHIP, PERSEVERANCE, AND UPLIFT), WITH THE AIM TO TEACH AND ENCOURAGE YOUNG AFRICAN-AMERICAN MALES TO POSITIVELY DEFINE, PLAN, PURSUE AND ACHIEVE THEIR FUTURE.

Benefit of Omega Gents

The young men benefit by experiencing personal development essential to their long-term success. Our Gents develop academically, socially and emotionally. They grow through various support services and exposure to new positive experiences that reinforce critical life skills. Gents also develop a sense of community by participating in a wide range of service projects. They build confidence necessary to visualize, believe and pursue their dreams. Finally, Gents complete our program with a network of friends to provide continued support.

Educational programs and workshops include:

- Self Identity, Self Esteem & Self Assessment
- Health & Well-being
- Goal Setting & Planning
- Academic Achievement & College Preparedness
- Developing Positive Relationships
- Etiquette & Respecting Women
- College Campus Tours
- Career Days / Corporate Visits
- Community Service
- Social Outings

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Jeffery Douglas Jr – Epsilon Xi Chapter Basileus (President)
(510) 593-3848





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WAIVER / PHOTO RELEASE

*Please complete the entire form in pen with **black or blue** pen.*

I authorize Omega Psi Phi Fraternity, Inc., Epsilon Xi Chapter, & Capitol City Gents Program to use photos and/or other likeness of myself, my child or the child for whom I have legal guardianship and who is participating in the Capitol City Gents Youth Program for promotional materials to be used by/ for the Program. Such likenesses will not be sold to other parties. Promotional materials bearing these likenesses may be distributed for free to the public and posted on the Omega Psi Phi Fraternity, Inc., Epsilon Xi Chapter & Capitol City Gents Program electronic and print media vehicles. Omega Psi Phi Fraternity, Inc., Epsilon Xi Chapter & Capitol City Gents Program reserve the right to use any photo or likeness for a time period beginning when this form is signed and ending upon written request by participant, parent or legal guardian.

Participant's Name, **printed**: _____

Parent/Guardian's Name, **printed**: _____

Parent/Guardian's Signature: _____ Date _____





CAPITOL CITY GENTLEMEN (GENTS) YOUTH PROGRAM **EPSILON XI CHAPTER OMEGA PSI PHI FRATERNITY, INC.**

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

Please complete the entire form in pen

In consideration for receiving permission to participate in the CAPITOL CITY GENTLEMAN (GENTS) YOUTH PROGRAM, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, Omega Psi Phi Fraternity Incorporated, Epsilon Xi Chapter, affiliate organizations, officers, agents, servants, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such programs or activities, or while in, on or upon the premises where the program or activity is being conducted.

1) I hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said programs or activities, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise.

2) It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of California.

3) IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made.

DATE: _____

PARTICIPANT

Printed Name

Signature (if 18 years old or older)

PARENT/ LEGAL GUARDIAN

Printed Name

Signature (if participant is under 18 years old)



Omega Psi Phi Fraternity, Incorporated
Epsilon Xi Chapter ©





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Describe any physical and/or psychological ailment, illness, weakness, limitation, handicap, disability, or condition:

1. Does participant suffer from, or have they experienced any of the following?

- asthma heart trouble physical handicap high blood pressure
 epilepsy or seizures diabetes frequent upset stomach other

If you checked other, please specify: _____

2. Is participant allergic to:

- Pollen Medication Food Insects Bites Other

If you checked any, please explain: _____

3. Should participant's activities be restricted for any reason? If yes, explain (attach addition documentation if necessary): _____

By signing this form, you assert that all information provided is accurate to the best of your knowledge.

Parent/Guardian Signature: _____

Date: ____/____/____

