



Alpha Kappa Alpha Sorority, Incorporated



Delta Upsilon Omega Chapter - Seattle, WA

in partnership with

Dynamic Urban Opportunities Foundation, Inc.



presents

"She is Soaring"

Youth Leadership Institute

Spring Cohort - March 2025

Meany Middle School

Seattle, WA



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Youth Leadership Institute (YLI) Parent/Guardian Permission Form

This Parent/Guardian Permission Form (the "Waiver") must be completed for all youth participating in Alpha Kappa Alpha Sorority, Incorporated® ("AKA") Youth Leadership Institute (the "YLI" or "program") which will cover all "YLI Activities" (as such term is defined in this Form) during the 2025 school year and hosted events including but not limited to field trips and any other event or activity hosted by the event coordinator(s). The form must be submitted prior to the youth participating in YLI and prior to any event that will occur outside of the customary location for YLI Activities listed in Section B below and must be re-executed and submitted each year the youth participates in the program. The form has seven parts: (1) Information about the Youth Participant, YLI and Offsite activity, (2) Parental Permission and Liability Release, (3) Media Release, (4) Medical Emergency Authorization (5) Pick-up Authorization, (6) Code of Conduct and (7) Parental/Legal Guardian Acknowledgement and Signature. Please read each section carefully and be sure to complete all sections and sign where requested.

1. Information about Youth Participant, YLI and Offsite Activity

A. Information about the Youth Participant

Name of Youth Participant (hereafter referred to as "my minor child" or "Participant"):

Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Email Address: _____

Birthdate: _____

Grade: _____

Age at Time of Participation: _____



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2. Parental Permission And Release Of Liability

Please read carefully. AKA operates the YLI, and in conjunction therewith, the Participant may engage in certain activities, learning experiences and events organized by AKA (including, without limitation, field trips to an escape room, restaurant, library, historical place, event venue or attraction event and/or other locations listed on this Form collectively, the “Event Spaces”). I hereby give my minor child permission to participate in the YLI and in the Offsite Activity listed in this form (collectively, the “YLI Activities”).

I, the undersigned, on behalf of the Participant, hereby give my authorization and permission for my minor child to participate in the YLI Activities. I understand that participation in the YLI Activities is voluntary and involves an inherent risk of serious bodily injury or death.

I understand that the YLI Activities could include physical activity including but not limited to walking, standing, sitting in a chair for extended periods of time, social interaction, and ascending and descending stairs (“Physical Activities”). I also understand that the YLI Activities may take place in a variety of Event Spaces and my minor child may perform YLI Activities including Physical Activities in such Event Spaces. I also understand that outdoor activities may occur in the hot sun, in the rain and similar less favorable weather conditions. I understand and agree that it is my responsibility to verify that the Participant is appropriately attired for all YLI Activities and to provide all transportation for my minor child to and from YLI Activities and Event Spaces. I understand that AKA may, in its sole discretion, dismiss any YLI participant, including my minor child, for inappropriate, disrespectful, or dangerous behavior at any time. If my minor child breaks or damages any property as a result of their direct or indirect behavior, I hereby acknowledge and agree that I am responsible for such damages and I agree to pay for its repair or replacement.

I AM AWARE AND UNDERSTAND THAT THE YLI ACTIVITIES ARE POTENTIALLY DANGEROUS ACTIVITIES AND INVOLVE THE RISK OF SERIOUS INJURY, DISABILITY, DEATH, AND/OR PROPERTY DAMAGE. I ACKNOWLEDGE THAT ANY INJURIES THAT MY MINOR CHILD SUSTAINS MAY RESULT FROM OR BE COMPOUNDED BY THE ACTIONS, OMISSIONS, OR



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NEGLIGENCE OF AKA, ITS OFFICERS, BOARD AND EMPLOYEES, EVENT COORDINATORS, CHAPTER MEMBERS, AGENTS AND VOLUNTEERS (COLLECTIVELY, "AUTHORIZED PERSONS"), INCLUDING NEGLIGENT EMERGENCY RESPONSE. As material consideration for AKA permitting my minor child to participate in the YLI Activities, I, for myself, my minor child, our personal representatives, heirs, executors, administrators, successors, assigns, or anyone else who may claim on my or my child's behalf (collectively, the "Releasing Parties"), hereby knowingly, intentionally and voluntarily **ASSUME ALL RISKS OF PARTICIPATION IN THE YLI ACTIVITIES WITH FULL KNOWLEDGE OF THE DANGER INVOLVED, AND I HEREBY AGREE TO ACCEPT AND ASSUME ANY AND ALL RISKS OF PERSONAL INJURY, ILLNESS, DISABILITY, DEATH TO MY MINOR CHILD, AND/OR PROPERTY DAMAGE DIRECTLY OR INDIRECTLY ARISING FROM MY MINOR CHILD'S PARTICIPATION IN THE YLI ACTIVITIES, BOTH KNOWN AND UNKNOWN, FORESEEN OR UNFORESEEN, CONTEMPLATED OR NOT CONTEMPLATED, OBVIOUS OR HIDDEN, EVEN IF CAUSED BY THE NEGLIGENCE OF THE AUTHORIZED PERSONS** (collectively, the "Released Parties"), and assume full responsibility for my minor child's undertaking in any social or physical activity and participation in the YLI Activities. Further, I, for myself, my minor child, and on behalf of the Releasing Parties, hereby knowingly, intentionally and voluntarily **WAIVE, RELEASE, DISCHARGE, INDEMNIFY, PROMISE NOT TO SUE, AND AGREE TO HOLD HARMLESS THE RELEASED PARTIES** from and against any and all losses, costs, claims, demands, causes of action, injury, damage, and liability whatsoever (including, but not limited to, court costs and attorneys' fees), whether presently known or unknown, with respect to any injury, disability, death or other harm, to any person, including my minor child, or property, or both, related to or arising from my minor child's participation in the YLI Activities **WHETHER OR NOT ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES, TO THE FULLEST EXTENT PERMITTED BY LAW.** I, for myself, my minor child and on behalf of the Releasing Parties, expressly waive the benefits of any statutory provision or common law rule that provides, in sum or substance, that a release and waiver of liability does not extend to causes of action that the Releasing Parties are unaware of or expect to exist in their favor at the time of the execution of this Waiver.



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3. Media Release

I, individually and as the parent(s)/guardian(s) of my minor child, and on behalf of the Participant, hereby grant to the Authorized Persons and those acting with their authority, the right to film, record, and photograph me and/or my minor child (collectively, the "Recordings") while participating in YLI Activities, programs, sponsored events, or classes for any reason whatsoever (including, without limitation, for a commercial or advertisement purpose).

I and/or my minor child hereby irrevocably grant AKA the worldwide, royalty-free, non-exclusive, sub-licensable, and perpetual right to create, digitize, modify, alter, edit, adapt, create derivative works based upon, display, publicly perform, exhibit, transmit, broadcast, reproduce, exploit, sell, rent, license, publish, re-publish, otherwise use, and permit others to use, the Recordings, including my and/or my minor child's name, image, likeness, appearance, and/or voice as they appear in the Recordings, in any and all media and digital or physical formats and by any and all technologies and means of delivery whether now or hereafter known or devised, on any platform, without further consent from or any royalty, payment, or other compensation to me and/or my minor child. I and/or my minor child also hereby irrevocably waive, to the greatest extent permitted by applicable law, any and all rights that I and/or my minor child may have regarding the use of the Recordings by AKA as set forth herein, including, without limitation, any rights to inspect, approve, have creative control over, or object to such use (including any editing, alterations, distortions, or transformations of the Recordings, or combinations of the Recordings with other materials). I and/or my minor child understand that, as between me and my minor child, on the one hand, and AKA on the other hand, AKA owns all rights, title and interest in all materials in which the Recordings may appear.

The Releasing Parties hereby release, forever discharge, hold harmless, and agree to indemnify the Releasing Parties, from any and all claims, actions, damages, losses, costs, expenses, and liabilities of any kind, arising under any legal or equitable theory whatsoever, in connection with the representations and warranties made, and rights granted, by the Releasing Parties, including any and all claims for violation of certain intellectual property rights, including copyrights, or claims for libel, invasion of privacy, right of publicity, slander, or defamation.



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4. Medical Emergency Authorization

In case of sudden illness or an accident requiring immediate treatment or surgery during any YLI Activity, I authorize the Authorized Persons to act on my behalf, attend to the Participant's care and aid, and take such action as they deem appropriate to protect the health and physical well-being of my minor child. This authority extends to any physician(s) and/or surgeon(s) selected by the Authorized Persons to perform medical and/or surgical procedures including examinations and tests necessary to preserve the health, mental and physical well-being and/or condition of my minor child. Further, the Authorized Persons may approve any and all non-emergency or emergency treatment that they deem reasonably appropriate and are authorized to sign any and all medical release or required forms on my behalf. In the event of an emergency, I understand that I will be notified of the situation as soon as practicable. I agree to pay any and all expenses that are incurred in the medical treatment of my minor child, including, but not limited to all transportation costs to and from a medical facility, and, if necessary, transportation to my home or applicable medical facility.

I certify that (i) the Participant is in good health and sufficient physical condition to participate in the YLI Activities, including any event that may arise, and (ii) I will immediately remove the Participant from the YLI Activities if there is any material changes to the Participant's health and physical condition that could become aggravated by their participation in the YLI Activities.

Name of Parent/Guardian: _____

Primary Phone Number: _____

Secondary Phone Number: _____

Email Address: _____

Name of Additional Emergency Contact: _____

Primary Phone Number: _____ Secondary Phone Number: _____

Email Address: _____

Health Insurance: Company Group# _____



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5. Pick-Up Authorization

In addition to the parent/guardian(s)/emergency contact listed above, please list the names of any possible persons authorized to pick up the above referenced Participant. Please Note: Photo ID's must be presented at the time of pick up.

Name : _____

Relationship to Participant: _____

Primary Phone Number: _____

Secondary Phone Number: _____

Name: _____

Relationship to Participant: _____

Primary Phone Number: _____

Secondary Phone Number: _____



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6. Code Of Conduct & Responsibility Contract

As a participant of the YLI:

1. I agree to abide by the rules and regulations set forth by AKA and conduct myself with respect.
 2. I will not bully or participate in negatively speaking to or of anyone or act violently.
 3. I understand that my participation may be revoked after three unexcused absences from meetings and activities within the program year and that I must notify AKA of any absence.
 4. I will be fully engaged in attending program meetings and activities that will include monthly activities.
 5. I understand that I cannot bring guests to meetings or activities without prior consent or knowledge of the AKA.
 6. I understand that this form will be kept on file by AKA and local AKA sorority members.
- By signing below, I certify that I have read and understand all the above.

Signature of YLI Participant_____ Date: _____



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7. Parental/Legal Guardian Acknowledgement and Signature

Please read carefully. I represent and warrant that (a) I am the parent or legal guardian of my minor child, (b) no court has issued any order, judgment, or decree granting custody of my minor child to anyone else or otherwise affecting my rights as parent or legal guardian, (c) my minor child has not been emancipated, (d) I have the legal right, power, and authority to consent to this Waiver including but not limited to the parental permission and liability release, the media release and the medical emergency authorization (collectively the "Releases") on behalf of my minor child and myself, and (e) I am at least 18 years of age. I have read, and I understand, this entire Waiver including the Releases. By signing below, I hereby consent to and approve in all respects the terms and conditions of this Waiver including its Releases and agree that both my minor child and I, and all other Releasing Parties, shall be bound by all of its terms and conditions. I understand that this Waiver is not revocable. I agree to defend, indemnify, and hold harmless the Authorized Persons from and against all claims by third parties resulting from me or my minor child's breach or alleged breach of this Waiver and its Releases or any of the representations and warranties contained herein. The Waiver including the Releases shall be binding upon me and my minor child, and me and my minor child's heirs, legal representatives, successors, and assigns. No modification to any of the Releases will be effective unless in writing and signed by me and AKA's executive director.

This Waiver supersedes any other agreements or representations with respect to the subject matter hereof and is governed by the laws of the State of Illinois, without regard to its conflicts of laws principles, and is intended to be interpreted as broadly as possible and shall be binding to the fullest extent of the law. I agree that any disputes and matters arising under or related to this Waiver shall be litigated, if at all, exclusively before a court located in Cook County, Illinois or the Federal District for the Northern District of Illinois. I agree that if any portion of this Waiver is found to be void or unenforceable, such unenforceability shall not affect any other provision, and this Waiver shall be construed as if such provision had not been part of this Waiver.



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I HAVE CAREFULLY READ THIS WAIVER AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A WAIVER OF LIABILITY AND I AM SIGNING IT OF MY OWN FREE WILL. I INTEND THAT THIS WAIVER BE LEGALLY BINDING UPON ME, MY CHILD AND THE RELEASING PARTIES.

Parent/Guardian 1 Printed Name

Parent/Guardian 2 Printed Name

Date:_____

Date:_____

APPROVED BY:_____

Signature of Chapter YLI Coordinator:_____

Printed Name:_____



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**Youth Leadership Institute (YLI)
Youth Intake Form
Youth Information**

Name: _____

Address: _____

Age: _____ Gender _____ Grade: _____

Parent/Guardian Information

Last Name _____

First Name: _____

Telephone Home: _____ Cell: _____

Email: _____

Relationship to Youth _____

Youth Interests

- ☐ Art
- ☐ Dance Photography
- ☐ Gardening/Nature
- ☐ Social Media
- ☐ Video Games

- ☐ Coding
- ☐ Entrepreneurship
- ☐ Music
- ☐ Social Justice
- ☐ Video/Filmmaking

- ☐ Community Service
- ☐ Financial Literacy
- ☐ Public Speaking
- ☐ Sports
- ☐ Writing