



# YOUTH AT THE BOOTH APPLICATION/PERMISSION FORM

This form represents a commitment from this student AND parent/guardian for participation in a voluntary, off-site school activity on Tuesday, May 7, 2019.

**STUDENTS - Please Print All Information and Sign Where Noted *IN INK*.**

Your School: \_\_\_\_\_

Your Full Legal Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Ph: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Which Carrier? Verizon Sprint AT&T T-Mobile Other \_\_\_\_\_

Home Ph: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

**Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ REQUIRED (FOR PAYROLL PURPOSES ONLY)**

**Students, please complete this form and check the appropriate line below:**

\_\_\_\_\_ I am 18 or will be 18 on or before November 5, 2019 and have attached a completed VOTER REGISTRATION Form. (Complete the form online. <https://olvr.sos.state.oh.us> Print and attach.)

\_\_\_\_\_ I ALREADY am registered to vote and have verified my registration status on the Franklin County Board of Elections website: (<http://vote.franklincountyohio.gov>)

\_\_\_\_\_ I am 17 and won't be 18 by November 5, 2019 so I am submitting this application form ONLY.

**Our signatures below indicate that my parent/guardian and I agree that:  
(Please check)**

\_\_\_\_\_ I am a United States citizen and a resident of Franklin County

\_\_\_\_\_ I will attend a 2½ - 3 hour training session

\_\_\_\_\_ I will work at my assigned polling location **ALL DAY Election Day, May 7 from 5:30 a.m. until at least 8:30 p.m. or possibly later (when dismissed)**

\_\_\_\_\_ I will inform my teachers, coaches, and employers that I will not be available at all on May 7<sup>th</sup>

\_\_\_\_\_ I will have transportation to and from the polling location

\_\_\_\_\_ I will work at any Franklin County voting location, many of which are places of worship. (Please indicate if, for religious reasons, you cannot work at a \_\_\_\_\_)

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

★ STUDENTS ARE ENCOURAGED TO BRING A BAG LUNCH, SNACK AND WATER ★

**Parent/Guardian Permission** I have reviewed and understand the conditions of this voluntary off-site activity and give my consent for my child to participate. I give my permission for my student to be photographed at this event.

**Signature of Parent/Guardian:** \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening: \_\_\_\_\_

**School Official Verification**

Student is: A senior? \_\_\_ Y \_\_\_ N In good standing and will represent the school well? \_\_\_ Y \_\_\_ N

Faculty Sponsor: \_\_\_\_\_ Signature: \_\_\_\_\_