

Young Native Scholars

Presents



INTERTRIBAL YOUTH

Helping Our Youth Grow

Through Academics, Leadership, Adventure, Culture & Wellness

Panama Tribal Exchange, Central America

August 5 – 11, 2010

(Please Print Clearly)

Name _____ Phone #(s) _____

Mailing Address: _____ City _____ State _____ Zip _____

Email: _____ SSN _____

Do you have internet access to receive email correspondence from us? Please circle: YES NO

Tribal Affiliation (if applicable): _____ Age: _____ DOB ___/___/___ Male Female

Language(s) Spoken _____

School/Profession: _____ City, State: _____

Grade/Position: _____ Current Overall GPA: _____

Reference: _____ Phone #: _____

Fall 2010 Class Schedule (if applicable):

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Extracurricular Activities (Clubs/Athletics/Cultural/Community Involvement, etc.): _____

Volunteer Service: _____

Work Experience: _____

• **What are you interested in? (Required)**

1. Please checkmark categories that interest you from the following list:

- | | |
|-------------|---------------------|
| - Ecology | - Political Science |
| - Culture | - Legal |
| - Science | - Language |
| - Education | - Recreation |

2. Search for Panama and Panama Tribes on the Internet or at your local library. Bring with you at least one issue relating to any of the categories you have chosen which you would like to learn more about.

A Program of The **BRIDGE** Non-Profit 501c

Collaboration Network: Humboldt State, Purdue, UC San Diego, San Diego State, CSU San Marcos, Palomar & Greater Inter Tribal Community
874 Seacoast Drive, Imperial Beach, CA 91932 Ph: 858.688.2624 or 760.301.0992 Fax: 619.429.6361

www.InterTribalYouth.org

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Panama Exchange (continued)

Student Name: _____ How Did You Learn About ITY? _____

Parent/Guardian Information (if under 18):

Name(s): _____ Occupation: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact: _____ Relationship: _____

Address: _____ Phone Number (s): _____

Does the student participant require any special accommodations or have any special medical conditions? (Disabled access, medication, diet, asthma etc.)? Yes No If yes, please describe: _____

Allergies: _____

Please review the downloadable FAQ sheet available on-line with this registration.

Student/Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Registration and \$300 non-refundable deposit due July 25, 2010 for Priority Registration – Submit Early!
Maximum of 20 students will be accepted for this program.

Registration form must be completed legibly.

Fee: \$1100 per participant. ITY currently has no sponsors for this program and funds are raised by participant.
\$300 due by July 25, 2010.
\$900 due by August 5th, 2010

All lodging, meals, instructors, logistics, outfitting, tours, and activity fees included.

Transportation to and from Panama is not included in the program fee and is the responsibility of the participant.
ITY Staff will be available to pick up/drop off students at the airport.

Return completed registration and \$300 non-refundable deposit by July 25, 2010. Checks/Money Orders Payable To:

The BRIDGE-ITY

memo: Panama, Student Name

874 Seacoast Drive, Imperial Beach, CA 91932

Accounting: 619-429-6621, **Barbara Fax:** (619) 429-6361, **Email:** registration@InterTribalYouth.org

****A confirmation packet with details will be mailed or emailed when your registration and deposit are received****

Registration or Payment Questions? Email registration@intertribalyouth.org, Debra Avila or Joanie Hanson, Program Coordinators, or call (858) 764-3900. Messages are returned often in the afternoon/evening.

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