



Statement of Commitment & Payment Form

Youth Leadership Adventures

Please complete and return this form by the paperwork deadline for your session listed in the table below.

Session Date	Acceptance Deadline	Paperwork Deadline
Session 1 - July 5 th - July 13 th	May 13 th , 2022	June 13 th , 2022
Session 2 - July 26 th - August 3 rd	May 23 rd , 2022	June 23 rd , 2022
Session 3 - August 16 th - August 24 th	June 3 rd , 2022	July 1 st , 2022

Participant Information and Release Form

I, _____ (*print name*), am committing to attend the Youth Leadership Adventures program and **will notify North Cascades Institute staff immediately should anything arise that prevents me from attending.** By accepting this position and signing my name in commitment, I understand that North Cascades Institute is providing me an opportunity that could otherwise be given to another deserving student.

By signing this statement of commitment, I agree to the following: **(***Please initial next to each line***)**

- _____ 1) I have completed all necessary forms to attend and they are true and complete to the best of my knowledge.
- _____ 2) In the event that something comes up and I cannot attend my course, I will contact Youth Leadership Adventures staff immediately.
- _____ 3) In the event that I will be arriving late to one of the pickup locations, I will contact Youth Leadership Adventures staff as soon as possible so they will know to wait for me.
- _____ 4) I agree to follow all of the COVID-19 safety guidelines put in place by the Youth Leadership Adventures program that have been outlined in the welcome packet and will notify Youth Leadership Adventures if I am feeling any symptoms or have possibly come in contact with someone who has tested positive for COVID-19.

Student Signature

Print Name

Date

Parent/Guardian Signature

Print Name

Date

Payment Form

**If paying your course fees in full by your paperwork deadline is a burden, please contact us to schedule a payment plan.
Full balance must be received seven days before the start of the course if you are on a payment plan.**

1. Call us with your credit card information at (360) 854-2588;
2. Mail a check made out to North Cascades Institute to:

North Cascades Institute
Attn: YLA
810 State Route 20
Sedro-Woolley, WA 98282-1263

3. Fill out the form below with your credit card information and mail to the above address.

Student name: _____ Name on Card: _____

Visa/MasterCard/Discover #: _____

Expiration Date: _____ Zip Code of Card Holder: _____ Amount Enclosed: _____