



Changing Lives. Changing Communities.

28th ANNUAL HBCU/ACADEMIC COLLEGE TOUR



— April 12th to 17th, 2020 —

This year we are visiting several historic colleges and universities including:

Alabama State University
Clark Atlanta University
Georgia State University
Morehouse College
Spelman College
Tennessee State University
Tuskegee University



MANDATORY MEETING for all parents and students will be held Friday,
March 27, 2020 at 5:00 PM at our East Office located at 993 E. Main St.
All money is due by the meeting.

**For more information, call (614) 272-1464 or visit our
website at www.cndcolumbus.org**

Primarily funded by:





College Tour Registration Form

ID# _____

Child's Name _____
(First Name) (Middle Initial) (Last Name)

Address _____ Apt # _____ Zip Code _____

Home Telephone _____ Cell Phone _____

Date of Birth _____ Age _____ Gender: Male _____ Female _____

T-shirt size (check one) Youth Adult Size: S M L XL 2XL 3XL 4XL

Race/Ethnicity: African-American Asian Bi-racial Hispanic/Latino
 Native American Somalian White Other: _____

School _____ Grade _____

Parent/Guardian Name _____
(Please Print) (Relationship)

Allergies (please list) _____

Medications (please list) _____

Emergency contact _____
(Please Print) (Relationship)

Address _____ Contact # _____

*****I understand that my child's participation in the CND program is voluntary. I also understand that CND is not responsible for any valuables my child brings to any CND program. *****

Parent/Guardian _____
(Signature) (Date)

Staff _____
(Signature) (Date)

FOR OFFICE USE ONLY		
<input type="checkbox"/> East Office	<input type="checkbox"/> South Office	<input type="checkbox"/> West Office
<input type="checkbox"/> College Tour		
Date of Registration _____	Prior Involvement: <input type="checkbox"/> Yes <input type="checkbox"/> No	

College Tour Permission Slip

I, _____, give my child _____ my permission to attend the CND’s Academic College Tour with the staff and representatives of the Community for New Direction program. I also understand this is a voluntary activity and is sponsored for selected youth involved in the program.

If you agree to these terms initial here: _____

Medical Emergency Authorization

I give the staff of CND permission to seek medical attention for my child in case of an accident or medical emergency, including if deemed necessary at a licensed hospital facility. I am aware that a member of CND staff will contact me to inform me of such an emergency. The number or numbers that I can be reached in case of an emergency are:

_____ or _____

If you agree to these terms initial here: _____

Behavioral Contract

My child and I agree to the zero tolerance policy of the CND College Tour. I understand that if my child fights, refuses to participate, doesn’t follow rules or is blatantly disrespectful with another child or staff, he/she will be sent home for the remainder of College Tour. I fully understand that my fee will be forfeited.

If you agree to these terms initial here: _____

Videotaping Authorization Waiver and Image Release

I hereby authorize and consent to the videotaping, picture taking or recording of my child’s image and voice for public display and dissemination. I voluntarily make this authorization and consent fully realizing that in granting my permission I consent to the use of said film, videotape, or photograph in such a manner as CND deems reasonable and necessary.

I hereby waive any right, claim or actions that I may have to receive payment, consideration, compensation or royalties for the use of my child’s image and voice in all matters videotaped by CND. I also waive any right or claim of privacy that I may have incident to or arising out of production, creation, making, recording, public display or public dissemination, of said videotape or picture.

Furthermore, I, for myself, my heirs, executors, administrators, and assigns, forever discharge and hold harmless CND, their agents, and board of directors.

If you agree to these terms initial here: _____

Parent/Guardian _____ (Signature) _____ (Date)

Staff _____ (Signature) _____ (Date)



Community for New Direction 2020 Academic College Tour

Please sign this form and return to Community for New Direction staff

I, _____ give my child, _____,

permission to miss school to attend the Community for New Direction's 2020 College Tour from Sunday, April 12th through Friday, April 17th. My child will be visiting several historic sites and colleges that include Alabama State University, Clark Atlanta University, Georgia State University, Morehouse College, Spelman College, Tennessee State University and Tuskegee University.

Signature (Parent/Guardian)

Date

Cut here _____ Cut here

Please sign this form and return to your child's school and/or homeroom teacher

To whom it may concern,

I, _____ give my child, _____,

permission to miss school to attend the Community for New Direction's 2020 College Tour from Sunday, April 12th through Friday, April 17th. Please give my child their missed assignments and/or homework so they can work on it during the tour. My child will be visiting several historic sites and colleges that include Alabama State University, Clark Atlanta University, Georgia State University, Morehouse College, Spelman College, Tennessee State University and Tuskegee University.

Signature (Parent/Guardian)

Date



Community for New Direction

2020 Academic College Tour

Dear Supporter of Education,

The student presenting this form to you has expressed an interest in attending college. They have the unique opportunity to participate in a college tour with the Community for New Direction. The cost of the tour is \$400.00. The dates are Sunday, April 12th, 2020 to Friday, April 17th, 2020. The tour will visit the following schools: Alabama State University, Clark Atlanta University, Georgia State University, Morehouse College, Spelman College, Tennessee State University and Tuskegee University.

Many of our students are in need of financial assistance to make this educational trip. Please help this student enhance his/her future prospect of attending college with your donation.

For further information and questions, please contact our office at (614) 272-1464.



Student Sponsorship Form

Name	Address	Amount	Receipt Requested
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			