

# AFRICAN RITES OF PASSAGE SYSTEMS

## SATURDAY ADVANCED YOUTH LEADERSHIP ACADEMY

### YOUTH DEVELOPMENT PROGRAMS AND MENTORING INITIATIVES

#### 2008 – 2009 UNIFIED APPLICATION AND REGISTRATION FORM 2008 – 2009

Please print or type. One form per person. Duplicate as necessary. Division/Sector # \_\_\_\_\_ Region: \_\_\_\_\_

Prefix	First Name	Last Name	Suffix (Jr., Sr., etc)
Adult Academy or Student Academy (List One)		Age	Grade
		Date of Birth	Gender: M or F
Student ID No.			
Address [Number, Name, and Apartment, If Applicable]			
City		State	Zip Code
Phone Number	Fax Number	E-mail Address and/or Website URL	
School's Name/School District/College/University		School Academy/House/SLC/Shop	Major
Sponsoring/Affiliated Organization(s)		Religious/Spiritual Observations and/or Memberships	
Select the academy/academies of interest: <b>{More than one academy can be checked. Each requires applications and interviews.}</b>			
<b>Philly Project PRIDE (Personal Recognition Ignites Deliberate Emotion)</b> <ul style="list-style-type: none"> <li>• Sportsmanship, Sportswomanship and Athletic Training Regimen</li> <li>• College Preparation and Career Awareness</li> <li>• Character and Personal Development</li> <li>• NFL-Based Flag Football League, Camp and Competitions</li> <li>• Health and Nutrition Awareness Workshops</li> <li>• Leadership Development and Motivation Seminars</li> <li>• Community Services and Service Learning Activities</li> <li>• Trips and Outings, and Career Shadowing Opportunities</li> <li>• Community Mapping, and Resource Development</li> </ul> <input type="checkbox"/> <b>Open to all participants</b>		<b>Advanced Rites of Passage (Accelerated Academies, Special Divisions, Ages 10 – 13, 14 – 18, and 19 - 24, Males &amp; Females)</b> Rites of Passage Leadership Academy, Sentinel Scout and Warrior Academy, Swimming and SCUBA Diving, Martial Arts Academies, Digital Video Academy, Advanced Drumming Classes, Advanced Warrior Council, Sports Competitions, Step Team and Drill Instruction, African Centered Heritage Clubs, Wilderness Survival Trips, College Trips, ATV/4-Wheeler Trips, PFT Physical Fitness Training, Security Training Academy, Skirmish Paintball League, Annual Skiing and Snowboarding Trip, Service Learning Credits, and Social Activities. <input type="checkbox"/> <b>Open to all Advanced Youth Participants</b>	
<b>Pro Sports Basketball and Athletic Training Program</b> <ul style="list-style-type: none"> <li>• Sports Management Classes</li> <li>• Mentoring Workshops: Becoming Student Athletes</li> <li>• Athletic Training Classes; Sports Academic Classes</li> <li>• NBA Athletes' Sponsored Summer Basketball Camp</li> <li>• Basketball, Boxing, Football, Gymnastics, and Soccer</li> <li>• Basic and Advanced Chess Academy and Tournament(s)</li> </ul> <input type="checkbox"/> <b>Open to participants in Grades 9 to 11 {Others may inquire}</b>		<b>Sentinel Basketball Tournament League</b> <ul style="list-style-type: none"> <li>• 3 on 3 Man Tournament</li> <li>• Team Tournaments</li> <li>• Shoot Out Competitions</li> <li>• Trophies, Give-A-Ways</li> <li>• All Star Games (Unlimited Ages)</li> <li>• Skills and Training Clinics</li> <li>• Ages 14+ - 18 {Young Men}</li> <li>• Ages 14+ - 18 {Young Women}</li> <li>• Ages 12+ - 13 {Young Boys}</li> <li>• Ages 12+ - 13 {Young Ladies}</li> <li>• Championship Prizes</li> <li>• Team Jerseys, T-Shirts</li> </ul> <input type="checkbox"/> <b>Open to any and all participants; Others on a case-by-case basis</b>	
<b>Advanced Youth Leadership Council and Training Academy</b> <ul style="list-style-type: none"> <li>• Computer Repair and Refurbishing Academy</li> <li>• Computer Engineering Academy (<b>Build &amp; take a computer home</b>)</li> <li>• City-Wide Youth African Drumming and Dance Troupe</li> <li>• City Wide Rites of Passage and Youth Advisory Council</li> <li>• African History/Jeopardy Competition (For Prizes)</li> <li>• Community-Based Service Learning Projects (High School Credits)</li> <li>• City-Wide Youth Rites Of Passage Government {Advanced Youth}</li> <li>• Safe and Drug Free Schools Youth Advisory Council</li> <li>• Safe and Drug Free Schools Parents' Advisory Council</li> </ul> <input type="checkbox"/> <b>Open to any and all participants</b>		<b>Academic Excellence, College and Career Planning Sequence</b> <ul style="list-style-type: none"> <li>• Petersons' Guide Workshops: College and Career Preparation</li> <li>• SAT and ACT Preparation Classes/Workshops</li> <li>• Foreign Language Courses—includes Espanol, Arabic, French, Chinese Swahili, Portuguese, &amp; Metu Neter (Black Egyptian Hieroglyphics)</li> <li>• African American Studies/History Course Service Learning Project - Half (1/2) and One (1) credit service learning projects towards High School graduation (applies only to students from the School District of Philadelphia, in 10<sup>th</sup> through 12<sup>th</sup> grades, unless otherwise noted)</li> <li>• Leadership &amp; Resiliency Program (RBI) Saturday Academy Activities</li> </ul> <input type="checkbox"/> <b>Open to any and all participants</b>	
<b>Please list any special needs, requests, concerns or desired trainings.</b>			
Registration Fee: \$5 {Ages 10 to 21 years; Includes Photo Identification, Application Processing, & Nexus Registry}			
Membership Fee: \$10 {Ages of 14 to 21 years; Membership is good for one year; Includes Insurance Coverage}			
Activity Fee: All General Events and Activities Are <b>FREE</b> , Unless Otherwise Advertised. Lunch is provided <b>FREE!!!!</b>			

**THESE SECTIONS ARE FOR ADDITIONAL YOUTH BACKGROUND INFORMATION AND PARENTAL PERMISSIONS**

Relationship	Parent/Guardian's First Name	Parent/Guardian's Last Name	Suffix (Jr., Sr., III, etc)
Mother/Guardian			
Father/Guardian			
Emergency Contact:	Name:	Relationship:	Phone Number:
<b>Allergies: Food, medicines, insects, plants, etc: {Please answer Yes or No, and types below, if yes}</b>		Please list details of all types of allergies, below:	
General Information: Yes No		Yes No	
ADHD (Attention Deficit Hyperactivity Disorder)	<input type="checkbox"/> <input type="checkbox"/>	Asthma	<input type="checkbox"/> <input type="checkbox"/>
		Convulsions/seizures	<input type="checkbox"/> <input type="checkbox"/>
		Heart Trouble	<input type="checkbox"/> <input type="checkbox"/>
		High Blood Pressure	<input type="checkbox"/> <input type="checkbox"/>
		Diabetes	<input type="checkbox"/> <input type="checkbox"/>
		Hemophilia	<input type="checkbox"/> <input type="checkbox"/>
		Kidney Disease	<input type="checkbox"/> <input type="checkbox"/>
List any medications to be taken during the program		List any dietary needs, food or religious observances	
List any physical or behavioral conditions that may effect or limit full participation in swimming, backpacking, hiking long distances, running, biking, skiing, or playing strenuous games {basketball, football, martial arts, etc.}:			
List equipment needed such as wheelchair, braces, crutches, eye glasses, contact lenses, etc.:			
<b>Immunizations (give date of last inoculation):</b>			
Tetanus Toxoid _____	Pertussis _____	Mumps _____	Polio _____
Diphtheria _____	Measles _____	Rubella _____	Other: _____
Name of personal or family's physician	Address	Phone Number	Cell Phone Number
Youth's/Participant's Name:	Youth's/Participant's Signature:	Date:	
<b>Parent Authorization {For youth under the age of 18 years}:</b>			
<p><b>This health history is correct so far as I know and attest, and the person herein described has permission to engage and participate in all prescribed activities, except as noted by me, in the event of illness or accident in the course of such activities. I request that measures be instituted without delay as the judgment of medical personnel dictates, with program sponsors in advisement and consultation, of any procedures. Furthermore, I give permission for the program sponsors to review applicable school and academic records for the purpose of mentoring the youth whose name is listed on this application. This information is not to be given to any other person, party, or organization without my expressed, written consent.</b></p>			
Parents'/Guardian's Name:		Parent/Guardian's Signature:	Date:
<p align="center"><b>PLEASE CONTACT THE DELAWARE VALLEY NETWORK RITES OF PASSAGE MEMBERS FOR MORE INFORMATION AT:</b></p>			
Praxis Institute Maximal16@yahoo.com 267.970.3432	Pro Sports Community Consultants HouseOfGhana@comcast.net 215.380.0817	Sentinel Venture Crews RitesSystems@gmail.com 267.228.5636	Philly Project PRIDE Thrifty12@hotmail.com 267.231.0702
<p align="center"><b>Copyright 2008 © Sentinel IMPI Venture Crews and Warrior Scouts' Advanced Saturday Academies</b></p>			