



Youth Sponsor Request



Name	First	Last	Age	
Current Grade (If summer, the last grade completed)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	E-mail Address
				Youth: Parents:

Name of parent or guardian on military orders to new community	First	Last
Arrival date in new community	Phone number of Parent: Phone number of Youth:	

(DOUBLE CLICK ON BOXES TO CHECK APPLICABLE BOXES)

Requestor's Hobbies & Interests <i>(To be filled out by requestor)</i>			
Sports	Music	Clubs/Programs	Other Hobbies & Interests
<input type="checkbox"/> Baseball	<input type="checkbox"/> Alternative Rock	4-H Club name:	<input type="checkbox"/> Animals
<input type="checkbox"/> Basketball	<input type="checkbox"/> Emo		<input type="checkbox"/> Cars
<input type="checkbox"/> Bowling	<input type="checkbox"/> Choir	<input type="checkbox"/> Army Teen Panel	<input type="checkbox"/> Computers
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Classic Rock	<input type="checkbox"/> Boy Scouts	<input type="checkbox"/> Cooking
<input type="checkbox"/> Football	<input type="checkbox"/> Composing Music	<input type="checkbox"/> Career Launch	<input type="checkbox"/> Dancing
<input type="checkbox"/> Frisbee	<input type="checkbox"/> Country	<input type="checkbox"/> Chapel Youth Group	<input type="checkbox"/> DJ-ing
<input type="checkbox"/> Golf	<input type="checkbox"/> Electronica	<input type="checkbox"/> Dragonfly Quest	<input type="checkbox"/> Drama
<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Gospel	<input type="checkbox"/> Environmental	<input type="checkbox"/> Filmmaking
<input type="checkbox"/> Hiking	<input type="checkbox"/> Goth	<input type="checkbox"/> FBLA	<input type="checkbox"/> Fitness
<input type="checkbox"/> Hockey	<input type="checkbox"/> Metal	<input type="checkbox"/> Geocaching	<input type="checkbox"/> Movies
<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Hip Hop/Rap	<input type="checkbox"/> Goals for Graduation	<input type="checkbox"/> The Outdoors
<input type="checkbox"/> Judo	<input type="checkbox"/> Indie Rock	<input type="checkbox"/> Girl Scouts	<input type="checkbox"/> Painting
<input type="checkbox"/> Karate	<input type="checkbox"/> Industrial	<input type="checkbox"/> JROTC	<input type="checkbox"/> Photography
<input type="checkbox"/> Kung Fu	<input type="checkbox"/> Pop/Top 40	<input type="checkbox"/> Junior Honor Society	<input type="checkbox"/> Reading
<input type="checkbox"/> Running	<input type="checkbox"/> Punk	<input type="checkbox"/> Keystone Club	<input type="checkbox"/> Science
<input type="checkbox"/> Soccer	<input type="checkbox"/> R&B/Soul	<input type="checkbox"/> Model UN	<input type="checkbox"/> Scrapbooking
<input type="checkbox"/> Soft Ball	<input type="checkbox"/> Reggae	<input type="checkbox"/> Passport to Manhood	<input type="checkbox"/> Sightseeing
<input type="checkbox"/> Swimming	<input type="checkbox"/> Singing/Vocals	<input type="checkbox"/> SMART Girls	<input type="checkbox"/> Skateboarding
<input type="checkbox"/> Tae Kwon Do	<input type="checkbox"/> Ska	<input type="checkbox"/> Sports Club	<input type="checkbox"/> Technology
<input type="checkbox"/> Tennis	<input type="checkbox"/> Techno/Dance	<input type="checkbox"/> Teen Tech Team	<input type="checkbox"/> Video Games
<input type="checkbox"/> Volley Ball	<input type="checkbox"/> Writing Lyrics	<input type="checkbox"/> Torch Club	<input type="checkbox"/> Weblogging
<input type="checkbox"/> Walking	Other:	<input type="checkbox"/> Youth Advisory Cnsl.	<input type="checkbox"/> Weights
<input type="checkbox"/> Wrestling	I play this instrument:	<input type="checkbox"/> Youth Ldrshp. Forum	<input type="checkbox"/> Writing
Other:		Other:	Other:

Please include any additional information that might be helpful to the sponsorship staff in the assignment process as they attempt to pair you with a sponsor whom you will be most compatible with.

I hereby give my consent to the release my child's name and address for the purpose of participating in the Youth Sponsorship Program. I understand that this form is not an official government record and that this information will not be used for any other purpose.

Parents/Guardians signature: _____ Date: _____

Upon completion, please e-mail to: Cnicseftwomwr-navyslo@us.navy.mil