

Please send your completed registration with fees to: <b>The American Legion Boys State          of Kansas Leadership Academy</b> PO BOX 8176 Wichita KS 67208-8176 (866) 241-9920 – Toll Free (316) 858-3680 – Fax troy.fowler@ksbstate.org <a href="http://www.kansasboysstate.org">www.kansasboysstate.org</a>	<b>Registration Due:</b> <b>APRIL 15, 2019</b> Registrations received after this date will still be considered. <b>Secure a spot by registering on-line          at <a href="http://www.kansasboysstate.org">www.kansasboysstate.org</a></b>
	<b>Session Dates :</b> <b>June 2 to 7, 2019</b>

**DELEGATE: PLEASE PRINT OR TYPE** - Requirements: Must be a junior in high school in the top half of your class and be involved in extra-curricular activities in your school and community. **A verification signature by a school official is required on the back of this form.**

Applicant First Name ☞	Applicant Last Name ☞	<b>Control Number (For Office Use Only) ☞</b>
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**Primary E-mail account:** A confirmation e-mail and an information packet will come by e-mail, so a valid account is critical. Please print legibly! We only send emails to one account per delegate. Please add [troy.fowler@ksbstate.org](mailto:troy.fowler@ksbstate.org) as a contact to **your primary account** to avoid information going to a junk mail folder (**especially if you use GMAIL**). This account can be a parent's, guardian's or school counselor's. You will not receive many emails but it should be checked regularly. **We recommend that you NOT use a school email address.** ☞

Home Mailing Address ☞	Date of Birth ☞ (mm/dd/yyyy)	T-Shirt (S M L XL 2XL 3XL)☞
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City ☞	State ☞	Zip ☞	Name of hometown newspaper ☞
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High School (Provide complete school name) ☞	Race/Ethnicity (OPTIONAL) ☞ <input type="checkbox"/> White, <input type="checkbox"/> Black or African American, <input type="checkbox"/> Hispanic or Latino, <input type="checkbox"/> American Indian or Alaska Native, <input type="checkbox"/> Asian, <input type="checkbox"/> Native Hawaiian or Pacific Islander, <input type="checkbox"/> Other
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Do you have any medical needs? (Please describe or attach page with information. NOTE: once accepted you will receive a medical form.) ☞	Applicant Cell Phone Number ☞ ( _____ ) _____ - _____  Is this phone a Smartphone (Yes or No)? _____
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Please rate the degree to which you agree or disagree with the following statements.  
 Please respond by using this scale: 1 - Strongly Agree 2 - Agree 3 - Disagree 4 - Strongly Disagree

- \_\_\_ 1. The reduction of government bureaucracy is more important than preservation of the services it provides.
- \_\_\_ 2. Wealthy people should be taxed at a higher percentage than poor people.
- \_\_\_ 3. The government should provide for those who cannot provide for themselves.
- \_\_\_ 4. Affirmative action policies result in more harm than good.
- \_\_\_ 5. The freedom of speech, when in conflict with other rights, should be protected above all others.

• BY SIGNING THIS FORM, I GIVE PERMISSION FOR MY PICTURE AND/OR VOICE AND/OR SIGNED, WRITTEN COMMENTS TO BE USED IN THE PROMOTION OF THIS PROGRAM IN VIDEO, IN PRINT AND ON THE INTERNET. I AGREE TO ALLOW MY DEMOGRAPHIC INFORMATION TO BE SHARED WITH COLLEGES, OR OTHER INSTITUTIONS, ATTENDING THE COLLEGE FAIR. I AGREE TO ATTEND THE PROGRAM AND REIMBURSE MY SPONSOR IF I FAIL TO ATTEND AND DO NOT CANCEL BY THE REFUND DEADLINE. I AGREE TO ABIDE BY ALL OF THE RULES AND GUIDELINES OF THE AMERICAN LEGION BOYS STATE OF KANSAS.

NOTE 1: To be processed, this registration form must be signed and dated by applicant and their parent/guardian.

NOTE 2: No refunds will be offered after May 17, 2019

NOTE 3: Send **this original form** with information and signatures, do not send a photocopy.

NOTE 4: It is a good idea, but not required, to keep a photocopy of this form, once completed, for your files

\* Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

\* Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Delegate Name: \_\_\_\_\_

**TO BE COMPLETED BY PARENT OR GUARDIAN**

Name (of Parent/Guardian) ☞				
Home Phone ☞	Work Phone ☞	Cell Phone ☞		
Address ☞	City ☞	State ☞	Zip ☞	
In case of emergency ( <b>assuming your parent/guardian is NOT available</b> ) please contact: ☞ Emergency Contact Phone Number ☞				

**TO BE COMPLETED BY DELEGATE AND SPONSOR**

Please make checks payable to The American Legion Boys State of Kansas

DELEGATE'S FEE	(Pays for t-shirts, yearbook, & administration fees)	\$ 50
SPONSOR'S NAME (as it will appear on Thank You certificate)	COMPLETE MAILING ADDRESS OF SPONSOR	AMOUNT
	TOTAL DUE FROM SPONSOR(S)	\$275
	TOTAL DUE WITH REGISTRATION (\$275 SPONSOR FEE + \$50 DELEGATE FEE)	\$325

**Note: In addition to American Legion Posts, delegates have been sponsored by civic organizations, businesses, clubs, their families, and other interested individuals. Virtually anyone, including your parents, may sponsor you to attend Boys State.**

**FOR SCHOOL AND SPONSOR SIGNATURES**

High School Official Verification _____
Sponsor (if other than parent) _____
Post Official Signature (if also sponsor) _____
Title and Post # _____ Legion Dist. # _____

Please feel free to photocopy this registration form for the 2019 session or call us for more copies.