

# Youth Leadership Lexington County

is now accepting applications for the **2012** program!

## Rising High School Juniors and Seniors in Lexington County should not miss this summer program! Class size is limited.

Youth Leadership Lexington County is hosted and supported by Leadership Lexington County Alumni Association.

Leadership Lexington County graduates found the adult program was so informative that they decided to build a one week summer program each year for up to 40 rising juniors and seniors from Lexington County's high schools.



The program is designed to let students experience Lexington County. They will participate in team building exercises, including a challenge course at Saluda Shoals Park, visit a farm, local businesses, hospital facilities, participate in a courtroom mock trial and even tour the county jail!

**Applicants must be nominated by a teacher or administrator.** This is a great program to list on your college application. The future leaders participating in this program will learn about the culture and industry in our county and learn to network with others.

**DATES - APPLICATION:** This year's program will be held the week of **June 11 – 15, 2012.** Participants will be responsible for meeting at a central location each morning. Transportation to the day's activities, lunch & refreshments will be provided. **Complete the attached application and return postmarked by May 1, 2012.** Applications may be obtained from area high schools. Applicants will be contacted to schedule a personal interview for acceptance into the program.

**Return applications to:**  
Youth Leadership Lexington County  
P.O. Box 1203  
Lexington, S.C. 29071  
Or you may email to: [swilhide@earthlink.net](mailto:swilhide@earthlink.net)

Questions ? contact  
Scott Wilhide -803-413-7144 or Linda Kelly – 803-260-6884



### What is Youth Leadership Lexington County?

Youth LLC is a one week *interactive* class. Selected students have the opportunity to learn leadership principles, participate in business practices and learn about government services.

Application deadline: May 1, 2012  
(postmarked by) Return to:  
Youth Leadership Lexington County P.O.  
Box 1203, Lexington, S.C. 29071

Youth Leadership Lexington County  
will be held the week of *June 11-15, 2012*

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Parent or Guardian : \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Name of School: \_\_\_\_\_

Please check one:    Rising Junior             Rising Senior

Nominated by: \_\_\_\_\_

**IF under 18 Parent/Guardian required to sign, if 18 or older participant please complete.**

#### Parent/Guardian—Participant Permission and Release of Liability

I hereby give permission to the youth named above to participate in the event listed. Although Youth Leadership Lexington County and its chaperones will use the utmost precaution in guarding the health of the above participant and preventing accidents, I release them from any liability in case of illness or injury as a result of this activity.

Signature of parent/guardian/ participant: \_\_\_\_\_

Date: \_\_\_\_\_

**Please see and complete other side →**



**IF under 18 Parent/Guardian required to sign,  
if 18 or older participant please complete.**

## **Photography Consent Form**

I, *(printed name)* \_\_\_\_\_, parent/guardian of /for  
\_\_\_\_\_ *(participant name)* do hereby grant permission to  
Youth Leadership Lexington County to take and use: photographs, videotape and/or digital images of **my  
child/me** for use in promotional or educational materials as follows: printed publications or materials,  
electronic publications or presentations, websites. I agree that the participants name and identity:

**May be revealed**     **May NOT BE revealed**

in descriptive text or commentary in connection with the image(s). I authorize the use of these images  
indefinitely without compensation to me. All negatives, positives, prints, digital reproductions and videotape  
shall be the property of Youth Leadership Lexington County

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

**Signature of participant:** \_\_\_\_\_

Date: \_\_\_\_\_

**I understand that acceptance into the Youth Leadership Lexington County program will require me to  
be available to attend/participate in the daily activities of the program the week of  
June 11-15th, 2012 from 7:45 am—4:00 pm.** \_\_\_\_\_

Class participant signature

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