YOUTH TOUR 2020
Student Packet

*Student MUST be under 18 years of age at the time of the Youth Tour in June!

This packet contains:

♦ Student Registration Form
♦ Parental Liability Release Form
♦ Student Conduct Guidelines
♦ Medical Permission Form
♦ Flight Itinerary (see telco for flight arrangements)
♦ Youth Tour Agenda

Completed forms that need to be returned to your Telco:
(All forms must be forwarded to FRS by April 3, 2020)

☐ Student Registration Form
☐ Signed Parental & Liability Release Form
☐ Signed Delegate Conduct Guidelines Form
☐ Signed Medical Consent Form
☐ Flight Itinerary Form
☐ Recent School Photograph to include in the Youth Tour Yearbook (will be distributed to all attendees)
   (Electronic (PDF) version of photo if possible)

QUESTIONS? CALL FRS AT (703) 351-2026

**ALL INFORMATION IS DUE TO FRS NO LATER THAN APRIL 3, 2020**
STUDENT REGISTRATION FORM
(Due to FRS no later than April 3, 2020)

FIRST NAME: ________________________ LAST NAME ________________________

Nickname (if applicable) ________________________

AGE: ____________ SEX: M F BIRTHDAY: ______________

(MUST BE UNDER 18 YEARS OLD at the time of Youth Tour in June)

SPONSOR TELCO/COMPANY: _________________________________________________

HOME ADDRESS: ____________________________________________________________________

                      Street    City    State    Zip

HOME PHONE: (____)_________________ STUDENT CELL PHONE: (____)_______________

STUDENT E-MAIL ADDRESS (if applicable) ___________________________________________

SCHOOL: ___________________ ______________________________ ________________________________

SCHOOL ACTIVITIES: _______________________________________________________________

_____________________________________________________________________________________

EXTRACURRICULAR ACTIVITIES: _______________________________________________________

_____________________________________________________________________________________

HOBBIES & OTHER INTERESTS: _______________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

TELL US ABOUT YOUR HOMETOWN:

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

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PARENTAL RELEASE FORM

Instructions:

This form must be completed for each participating student by their parent or guardian. By signing this form, parent(s)/guardian(s) grant consent for their child to attend the 2020 FRS Youth Tour in Washington, D.C. Your signature releases your child into the supervision of the FRS staff and all accompanying chaperones.

Liability Information

Parents/Guardians of this student agree, by affixing their signatures, to the conditions set forth here-in.

Being parents/guardians of son/daughter who is to be the representative on the Foundation for Rural Service Youth Tour, we hereby agree to release FRS/NTCA, its representatives, agents, servants, and employees from liability for any injury to said minor—resulting from any cause whatsoever occurring to said minor at any time while attending the 2020 FRS Youth Tour – including travel to and from said event, excepting only such injury or damage resulting from willful acts of such representatives, agents, servants, and employees.

This form also grants FRS full permission to use any photographs, or videos of the students on the foundation’s Web site, in print materials and/or in promotional pieces for future tours. Signature(s) acknowledge that all parties have read and concur with the information contained herein

_________________________________________________  __________________
Parent/Guardian                      Date
DELEGATE CONDUCT GUIDELINES

The term delegate shall refer to the student representing their sponsoring telco at the 2020 Foundation for Rural Service (FRS) Youth Tour.

1. Students shall abide by all Youth Tour rules in a manner that will bring credit to their school and their sponsoring telco.

2. At all times, students shall keep the assigned chaperone or FRS staff informed of their activities and whereabouts while in Washington, D.C.

3. Students must stay in housing designated by FRS during the tour.

4. Students shall participate in authorized activities only.

5. Students shall not possess or use any alcoholic beverages or illegal drugs at any time, under any circumstances.

6. Students shall respect and abide by the authority entrusted to the FRS staff and chaperones.

7. Students will respect and abide by the designated curfew each night.

8. Students will adhere to dress regulations established for the FRS Youth Tour.

9. Identification badges must be worn as directed.

10. Smoking, including electronic cigarettes and vaping, will not be permitted.

11. Boys are not permitted in girls’ rooms and girls are not permitted in boys’ rooms at any time – unless an adult supervisor is present.

12. Students will refrain from expressing support or opposition of any political motivated action, including the wear of political clothing.

ACTION TO BE TAKEN IF STUDENT VIOLATES DELEGATE CONDUCT GUIDELINES: Student will be sent home immediately and sponsoring company, school, and parents will be notified.

I, _______________________________________, agree to abide by these Delegate Conduct Guidelines.
MEDICAL CONSENT FORM

STUDENT: ________________________________       __          Student Birthdate: ______/______/

(MUST BE UNDER 18 YEARS OLD at the time of Youth in June)

HOME ADDRESS: ____________________________________________________________________

_____________________________________________________________________________________

HOME TELEPHONE: _(___)___________________________________________________________

STUDENT’S PRIMARY DOCTOR: ______________________________________________________

DOCTOR’S ADDRESS: ________________________________________________________________

DOCTOR’S TELEPHONE:  work: _(___)__________________     home: (__)_____________________

INSURANCE COMPANY/POLICY #: (Include Medicare, etc.)
Please note that the student will be required to bring a current medical insurance card with him/her on the trip. Should an uninsured student require medical assistance, the student’s parent or guardian must accept full financial responsibility.

INSURANCE CO.:____________________POLICY #__________________ (Indicate ‘None’ if uninsured)

PARENT/GUARDIAN: _________________________________________________________________

ADDRESS: __________________________________________________________________________

_____________________________________________________________________________________

TELEPHONE:  work: (___)________________________      Home: (___)_________________________

ALTERNATE CONTACT/RELATIONSHIP: _______________________________________________

ADDRESS: __________________________________________________________________________

_____________________________________________________________________________________

TELEPHONE:  work: (__)________________________          Home: (__)_________________________

Please describe, in detail, any medical conditions or special needs, past or present, which need to be brought to our attention. Include all allergies, medicinal reactions, mental health problems, physical handicaps, heart and/or lung problems, seizures, convulsions, blackouts, etc. If you are currently taking any medications, please state the medication, its purpose and the prescribing physician and his/her phone number. Please also include any severe food allergies.

_____________________________________________________________________________________

_____________________________________________________________________________________

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MEDICAL CONSENT FORM, CONT.

The Federal Health Insurance Portability and Accountability Act, commonly referred to as HIPPA, requires an individual or the individual’s legal representative (parent of a minor, legal guardian) to provide permission for the release and exchanges of that individual’s health information in certain circumstances. By signing this form, you are giving health care providers permission to share medical information with the representatives from the Foundation for Rural Service (FRS).

In the event of an emergency, representatives from FRS will try to contact the parents or legal guardians prior to the administration of any medical treatment.

I/We the parents or legal guardian of _____________________________________________, a participant in the FRS Youth Tour, June 6 - June 10, 2020, give authorization for communication between medical providers and the representatives from the Foundation for Rural Service.

Instructions: Parent/Guardian ... Please check and sign ONE of the following statements.

1. In the case of an emergency, I grant full permission for immediate medical treatment (as required) by an attending physician while my child is in Washington, D.C. attending the FRS Youth Tour, June 6 - June 10, 2020. I accept full financial responsibility for any medical treatment received.

2. In the case of an emergency, I DO NOT grant permission for any medical treatment (as required) by an attending physician until I have been contacted. If I grant permission for treatment, I will then accept full financial responsibility for any medical treatment received.

__________________________________________________   ___________________
Parent/Guardian Signature        Date
FLIGHT ITINERARY

(Please attach a copy of the original flight itinerary issued by travel agent or airline)

ARRIVAL: Saturday, June 6, 2020
Please plan to arrive at Reagan National Airport (DCA)
between 12:30 p.m. to 5:30 p.m.

Departure City & Time: ________________________________
Airline & Flight Number: ______________________________
Connecting Flight City (if applicable): _______________________
Connecting Flight Airline & Flight Number (if applicable):

_____________________________________________

Arrival Time at DCA: ____________________________________________

DEPARTURE: Wednesday, June 10, 2020
Please plan to depart Reagan National Airport (DCA)
between 7:30 a.m. to 1:00 p.m. (Please note: FRS has the students arrive at the airport
2 hours before their scheduled departure to ensure time to get through security. This
means if their flight departs at 7:30 a.m., they will be at the airport at 5:30 a.m.)

Departure City & Time: ________________________________
Airline & Flight Number: ________________________________
Connecting Flight City (if applicable): _______________________
Connecting Flight Airline & Flight Number (if applicable):

_____________________________________________

Arrival Time at destination: ________________________________

A representative from the foundation will meet each student and chaperone at the end of the
hallway as he/she walks toward the baggage claim area. Airport transportation will be provided
to and from the hotel. **FRS representatives will only pick up individuals at Reagan National
Airport (DCA)** - please note that there are 3 airports in the Washington area ... please
confirm that you are flying into and out of Reagan National Airport (DCA) when making reservations.

If you have any concerns regarding your flight itinerary to Washington, DC please contact Brock before you book at (703) 351-2026.

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**2020 YOUTH TOUR AGENDA**  
(Preliminary)

### Saturday, June 6
- 12:30 p.m. - 5:30 p.m.  Arrivals in Washington, DC
- 6:00 p.m. - 6:30 p.m.  Chaperone Orientation Meeting
- 6:30 p.m. - 10:00 p.m.  Buffet Dinner, Review of Youth Tour, Orientation Activities

### Sunday, June 7
- 8:00 a.m. - 8:45 a.m.  Breakfast and Review of Days Activities
- 9:00 a.m. - 11:15 a.m.  Tour of Arlington National Cemetery
- 11:30 a.m. - 5:15 p.m.  Lunch & visit at the Smithsonian Museums
- 5:30 p.m. - 6:30 p.m.  Dinner at Union Station Food Court
- 6:30 p.m. - 9:30 p.m.  Night Tour of Washington D.C.  
  (including stops at the White House, WWII, Vietnam & Korean War Memorials, Lincoln Monument)

### Monday, June 8
- 7:30a.m. - 8:15 a.m.  Breakfast and Review of Days Activities
- 9:00a.m - 2:30 p.m.  Educational Session: “A Visit to the Hill”  
  **Sightseeing time at U.S. Capitol, Library of Congress, Supreme Court or you can visit your state Congressman or Senator**
- 2:45 p.m. - 3:00 p.m.  Group Photo at Capitol
- 3:00 p.m. - 4:30 p.m.  Tour of the Jefferson, FDR & Martin Luther King Memorials
- 5:00 p.m. - 7:00 p.m.  Bowling & Dinner at Bowlmor Lanes
- 8:00 p.m. - 9:30 p.m.  FRS Breakout Session on Rural America

### Tuesday, June 9
- 7:30 a.m. - 8:15 a.m.  Breakfast and Review of Days Activities
- 9:15 a.m. - 11:00 a.m.  Educational Session: “A Visit to the FCC”  
  **Federal Communications Commission (FCC) staff**
- 11:30 a.m. - 2:30 p.m.  Tour the Newseum (with lunch)
- 3:00 p.m. - 5:00 p.m.  Tour of Mount Vernon, Home of George Washington
- 7:00 p.m. - 11:00 p.m.  Farewell Dinner & Dance

### Wednesday, June 10
- 7:30 a.m. - 1:00 p.m.  Return Home
*In some instances, traffic, weather, or other issues may interfere with scheduled events. This itinerary is subject to change, at the discretion of the FRS staff, at any time.*