

Receipt/Opt-out

I, _____ verify that I have received the candidate information packet. I understand that to be considered for membership I must complete each form in the packet, including all necessary signatures, and return them no later than February 5, 2016. I also agree to abide by the member obligations if selected.

Candidate Signature

I, _____ verify that I have read through the candidate information packet with my student. I will assist or support him/her in completing the forms and obtaining all necessary signatures by the date mentioned above.

Parent/Guardian Signature

Opt Out

At this time, we respectfully decline the invitation to be considered for membership.

Candidate Signature

Parent/Guardian Signature

