City	Stat	te	_ Zip	Birthdate	
Phone		email			
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Relationship		Phone(s)			
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				aph or two about why y	
	Please read o	carefully an	d sign in ag	reement below:	
service learning	project for youth workers aff, to the best of my abili	s, and agree to ty and in a pro	o complete at l	articipate fully in the Treeho east 66 hours of service, und nner. If scheduling conflicts o ossible.	der the directio
l unde				evaluations show my service Service Award.	e to have been
with my partici allow photogra	pation in activities at Tre phs, video, and printed m	ehouse by vir naterial of my	tue of this agr participation i	Il liability to me and my fami eement with the Treehouse. n this program to be used b	. I also agree to y Treehouse on
		Channel, or p		r reporting or recruiting purp	ooses.
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Accepted:

Applicant's Full Name _

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