



Higher Aims Program

City of New Rochelle



Our Young Men. Our Future.

Please Print

Applicant's Name: _____ Applicant's Phone: _____

Address: _____ City: _____ Zip: _____

Grade/School: _____ Date of Birth: _____

Student Email: _____

Parent/Guardian Email: _____

Do you Have Google Classroom? Yes No

Parent/Guardian Name: _____ Parent/Guardian Phone: _____

Please return application to:

New Rochelle Youth Bureau
515 North Ave.
Monday – Friday 8:30am – 4:30pm

Please Submit With This Application Form:

1. A copy of your most recent report card
2. In a 250 word essay, please tell us about yourself and why you would like to be a part of the Jr Clubmen Higher Aims Program (one double-spaced page).

Higher Aims Release Form

Instructions: Please read and sign any/all sections.

- I hereby give the City School District of New Rochelle permission to release any information concerning my child to the New Rochelle Youth Bureau Administration:

Signature of Parent or Guardian: _____ Date: _____

(REQUIRED FOR ALL APPLICANTS – APPLICATION WILL NOT BE ACCEPTED WITHOUT SIGNATURE)

- I understand that due to limited staff resources and our relationship with the City School District of New Rochelle, all program participants must leave the facility no later than 5:30pm.

Signature of Parent or Guardian: _____ Date: _____

The undersigned hereby releases the City of New Rochelle, Youth Bureau, Department of Parks and Recreation, and City School District and its employees, agents, and volunteers of any liability in connection with any damage and/or injury that may be sustained as a result of participation in the above named program.

I hereby give New Rochelle Youth Bureau, Department of Parks and Recreation and Westchester Clubmen permission to use any photographs/videos taken pertaining to the Higher Aims Program.

Signature of Parent/Guardian

Date: _____

Completed forms must be submitted to:

**New Rochelle Youth Bureau
515 North Avenue
New Rochelle, NY 10801**