



TLA Ambassador Application Form

(Please print or type)

Ambassador Name: Last _____ First _____ M.I. _____

Mailing Address: Street: _____

City: _____ State: _____ ZIP: _____

County: ___ Calvert ___ Charles ___ St. Mary's ___ Other: _____

Ambassador Phone: _____ Email: _____

Age: _____ Birth date: ____/____/____ Gender: F M

T-shirt size: ___ S ___ M ___ L ___ XL

Ethnic Origin (check all that apply):

___ American Indian or Alaska Native ___ Asian ___ Black or African American

___ Native Hawaiian or other Pacific Islander ___ Hispanic or Latino ___ White

Parent/Guardian Name: Last _____ First _____

Parent/Guardian Cell Phone: _____ Email: _____

School Attending in September: _____ Grade Entering: _____

If you've previously attended the LEAD Camp, please indicate the year attended: _____

From which source(s) did you hear about TLA or Leadership Southern Maryland?

___ School ___ Leadership Southern Maryland ___ Newspaper/Camp Guides

___ MASC/Regional Student Council ___ Friends ___ Other: _____

I am being sponsored by _____ (name of school, county, or organization) to come to TLA.

Please have a parent/guardian sign the statement below:

I hereby grant permission for my child to apply to and participate in this program. I permit my child to ride on the buses provided by LSM for field trips during the program. I permit my child and his/her image to be involved in activities and media events that are designed to promote the benefits of Leadership Southern Maryland Inc. and the Teen Leadership Academy, including but not limited to photographs, videotapes, posting images on LSM's website, newsletters, Facebook page, and press releases.

Additionally, I hereby grant permission for LSM to share the school name and email address of my child with other participants in LSM programs, local school system personnel, Leadership Maryland, and local community leadership associations.

Parent/Guardian Signature: _____ Date: _____