

Hartford Public Library & Leadership Greater Hartford Youth Leadership Development Program

I give my son / daughter _____ permission to participate in the Youth Leadership Development program sponsored by Hartford Public Library. The program will be held on Wednesdays after school at Hartford Public Library, 500 Main Street, Hartford. The weekly sessions begin on Wednesday, March 4 and end on Wednesday, May 6, 2020. The program will include a community service project during the April School vacation week, and an outdoor adventure experience at Riverfront Recapture on the last day, which is an early school release day. I also give permission for photos of my son/daughter to be used to document program activities.

Transportation: Participating students will receive bus passes to travel from Bulkeley High School **to** the Library after school on Wednesdays and return home **from** the Library after the program concludes. Healthy snacks are also provided.

Student Name (Print)	Student cell phone	Student e-mail
Home Address	Home Phone	Grade in school
Parent / Guardian Name (Print)	Parent/Guardian Signature	Parent phone number

Emergency Contact Info:

Name (Print)	Phone Number	Relationship to Student
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➤ Questions? ➤

Contact: Michele Brophy, mbrophy@hplct.org
 860-803-3538 (cell/text) or 860-695-6329 (office)



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