



**BLACKS IN GOVERNMENT (BIG)
NATIONAL ORATORICAL COMPETITION**

PARTICIPANT BACKGROUND INFORMATION
(Please Print)

Student's Name: _____ Age: _____

Address: _____ City/State/Zip _____

Parent/Legal Guardian Name: _____

Phone: (day) _____ (night) _____

Email address: _____

If I cannot be reached, please notify _____ Phone: _____

Please list any food allergies: _____

Medical Insurance Company _____ Policy # _____

Is the student currently taking medicine or treatment? ___ Yes ___ No

If yes, explain: _____

Parent/Guardian Signature: _____ Date: _____

NOTE: This form is required and must be completed on each regional winner and submitted to the National Program and Planning Chair along with all other required documents.



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PARENTAL AUTHORIZATION (PARENT OR GUARDIAN)

(This form must be completed for each Regional 1st place winner.)

I hereby give permission for _____ to take part in the following activities:

- Round trip travel from my child's residence to BIG's National Training Institute (NTI) in Atlantic City, NJ;
- Stay at the Harrah Atlantic City, 777 Harrah's Blvd, Atlantic City, NJ 08401-6001; arriving **Wednesday, August 23, 2017** and departing on **Friday, August 25, 2017**.
- Participation in BIG's Oratorical Competition;
- Participation in and attend youth events sponsored by the National Organization of BIG; and
- Participation in and attend NTI workshops, and other social events.

So that my child can participate in BIG's Oratorical Competition, I agree to the following:

I give permission for my child to participate in the activities sponsored above by the National Organization of BIG. I hereby release BIG and its members from responsibility and liability for any illness or injury that my child may sustain during this activity. I agree that if I am present in Atlantic City, NJ during the time that the activities noted above are taking place, I will exercise supervision over my child. In the event of an emergency, if I cannot be contacted, I hereby authorize that emergency treatment may be administered. I agree and certify that my child understands that he/she must abide by any guidelines set forth by BIG, and certify that my child is mature enough to understand and abide by restrictions imposed upon him/her if I am not at the conference. I hereby release BIG and its members from responsibility and liability for the negligent and intentional acts of my child. I hereby release BIG and its members from responsibility and liability for the negligent or intentional acts of third parties that result in harm to my child. I fully understand and agree to the terms of this agreement, and have been given the opportunity to ask questions regarding this release prior to my signing the agreement.

Parent/Guardian Signature: _____ Date: _____

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