

Application Form

Student Informat	ion:				
Full Name:					
Date of Birth:				Grade level	
				During the 2025-2026 school yea	ır:
School Name:					
Address:					
City:				State:	
Zip:			Phone Number:		
Email Address:					
Do you have die	•	ions			
or special accommodation?					
Parent/Guardian	Informatio	n:			
Full Name:					
Relationship to Applicant:					
Phone Number:				Email Address:	
Are you a memb	er of Slope	Electric?*			
Emergency Conta	ct:				
Full Name:					
Relationship to Applicant:				Phone Number:	
•				•	de a response of no more n the Slope Electric Youth
Parent/Guardian I, [Parent/Guardia		ive consent	for my child	, [Applicant Name], to	participate in the North
· -	eer Tour. I ເ	ınderstand	that the tou	r may involve visits to	•
Applicant Signatu	re:			Date:	
Parent/Guardian					