

**OFFICE USE ONLY**  
Fall 2020 Virtual

Day of Week:  
Placement #

Recipients Initials:  
Entered in Database:

Paid:

## ANCHORAGE YOUTH COURT CLASS REGISTRATION FORM

*Register starting September 9, 2020, Monday – Thursday between 10:00am and 3:00pm at the AYC office (838 W. 4<sup>th</sup> Ave.) or online at [www.anchorageyouthcourt.org](http://www.anchorageyouthcourt.org). Each class is limited to 15 students. Registration is open until September 17 unless classes fill sooner.*

**QUALIFICATIONS: Must be a student in the Municipality of Anchorage in grades 7 - 12.**

**DIRECTIONS:**

1. Complete registration form, return to AYC office personnel (or complete online registration) along with a \$35 non-refundable fee (cash, check or credit card) payable to Anchorage Youth Court. (The fee can be waived for financial purposes.)

2. Registration is on a first come, first served basis. There is a limit of 15 students for each class.

Choose a class:  Mondays at 6:30     Wednesdays at 5:30     Thursdays at 5:30

Today's Date (Month/Year): \_\_\_\_\_

**Student's Name:** \_\_\_\_\_

**Family's home phone number:** \_\_\_\_\_

**Student's cell phone number:** \_\_\_\_\_ OK to text cell?  yes  no

**Student's e-mail address:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Mailing address, if different from above:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **School Attend(currently):** \_\_\_\_\_

(mo./day/yr)

**Grade:** \_\_\_\_\_ **High School Graduation Year:** \_\_\_\_\_

All Other Schools You Have Attended in Anchorage: \_\_\_\_\_

If you are home schooled or attend a private school, charter school, alternative school or any school other than the public school for the area where you live, what public school area do you live in? \_\_\_\_\_

If you play sports for, or participate in school activities at, a school other than the school you attend, please name that school (e.g., attend Steller but play basketball for West):

How did you learn about Anchorage Youth Court? \_\_\_\_\_



**WAIVER OF CONFIDENTIALITY UNDER AS 47.10.093**

Upon signing this form and joining the Anchorage Youth Court program, I agree that I will waive my right to confidentiality under AS 47.10.093 in the following manner:

I authorize McLaughlin Juvenile Intake to disclose to the Anchorage Youth Court Legal Advisor and/or the Executive Director information about any crime, which constitutes a misdemeanor or felony, if I should commit a crime in the future while I am an AYC member. Juvenile Intake is authorized to disclose to the Anchorage Youth Court Legal Advisor and/or the Executive Director the circumstances surrounding my arrest provided the charges against me are not dismissed by Juvenile Intake or the Anchorage Police. AYC will not, at any time, have the right to inspect my prior record, which is confidential.

I understand that if I commit a misdemeanor or felony, Anchorage Youth Court may use the information about my crime to bring ethical violation charges against me before the AYC ethics board or to take other appropriate administrative action. Ethical violation charges are not criminal, but are civil in nature. If the ethics board finds, after a hearing at which I may be represented by an AYC counsel, that by committing a crime I have breached my ethical duties, I understand that I can be disciplined by the AYC ethics board, up to and including disbarment, as set forth in the AYC Constitution.

Anchorage Youth Court will only use the information about me in connection with its administrative or ethical proceedings and will not release the information about my crime to anyone who is not directly affiliated with AYC.

Dated: \_\_\_\_\_

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Student Printed Name

**PARENT/GUARDIAN ACKNOWLEDGMENT**

I understand and agree that by joining Anchorage Youth Court and by signing this form, if my child commits a misdemeanor or felony in the future while he/she is an AYC member, Juvenile Intake has the authority to release information about the crime to the Anchorage Youth Court Legal Advisor and/or Executive Director which may result in ethical charges or other appropriate administrative action against my child. I understand that this consent is a waiver of my child's right to confidentiality under AS 47.10.093.

Dated: \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Parent/Guardian Printed Name



## Anchorage Youth Court

838 W. 4th Avenue

Anchorage, AK 99501

Phone: (907) 274-5986 Fax: (907) 272-0491

Email: [info@anchorageyouthcourt.org](mailto:info@anchorageyouthcourt.org)

Website: [www.anchorageyouthcourt.org](http://www.anchorageyouthcourt.org)

### ASSENT AND WAIVER

I, \_\_\_\_\_, as the parent/  
(printed name of parent/guardian)  
guardian of \_\_\_\_\_, hereby agree to allow  
(printed name of registering student)

my child to participate in the Anchorage Youth Court program. I acknowledge that my child is a volunteer of the program and agree to the fullest extent allowable under the laws of Alaska that I absolve of all liability and waive all claims against the Anchorage Youth Court, Inc., or any of its directors, officers, employees, or volunteers for any reason that may arise in any way from my child's participation in the Anchorage Youth Court events or meetings.

Additionally, I \_\_\_\_\_ grant permission for my child to  
(do/do not)

participate and appear in media projects created by Anchorage Youth Court or its agents. This includes video or audio recordings, films, photographs, written articles, or on websites and social media sites.

Anchorage Youth Court does not distribute the full names or schools of youth members.

Your selection remains valid for all media projects occurring during the time your child is an Anchorage Youth Court member. You may change your selection at any time by completing a new form at the Anchorage Youth Court office.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

. Student name: \_\_\_\_\_

Student signature: \_\_\_\_\_

Parent or legal guardian signature: \_\_\_\_\_