

OMEGA EDUCATIONAL FOUNDATION 501c3

P O Box 91302 Los Angeles, California 90009

25th Annual YOUTH LEADERSHIP CONFERENCE

Application

Participant Name: _____ Age: ____ Grade ____

Street Address: _____

City/State/Zip: _____

Parent/Guardian: _____

Telephone Number: () _____ Cell # _____ T-Shirt Size _____

Brief description of yourself and future goals:

School you attend: _____ Last Semester GPA _____

Activities (list as many as you like):

Did you attend our Youth Leadership Conference last year? Yes _____ No _____

Plans to attend College: Yes _____ No _____ If yes, where would you apply for college:

Why are you attending this 25th Annual Youth Leadership Conference?
