



# 2024

## MCPD Youth Leadership Academy

**06/17/24 – 06/21/24 8:30-3:30**

### Application

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School (entering in fall): \_\_\_\_\_

Grade Level (entering in fall) 6<sup>th</sup> \_\_\_\_\_ 7<sup>th</sup> \_\_\_\_\_ 8<sup>th</sup> \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact Telephone Number: \_\_\_\_\_

Allergies / Special Needs: \_\_\_\_\_

**\*Please circle Youth or Adult and circle the size**  
Shirt Size: Youth or Adult S M L XL XXL

**Why do you want to attend the MCPD Youth Leadership Academy?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Application Due by May 24<sup>th</sup>, 2024 at Noon to the Michigan City Police Department**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_