

Saturday March 13, 2021 (VIA ZOOM)

Name:					
Mobile Number:					
Home Phone Num	ber:				
Email Address:					
Mailing Address: _					
High School:					
Grade/Year:					
Please List your top	p three occupati	ions or career	areas of in	iterest:	
1					
2					
3					
Where do you see	yourself 10 yeaı	rs from now?	What are y	you doing for work? Where do you live	?
T-Shirt Size:	Small	Medium	Large	***	
Do you have any	food allergies t	that we shoul	ld be awa	re of? If yes, please list below:	

*** To ensure you receive the correct size t-shirt, applications must be received no later than February 22, 2021

Return completed form (scan and email) to sagrice@gmail.com by February 22, 2021





