

Visit our website at www.ksgirlsstate.org
Please type and save the form to print

Name Last Name First Middle
Mailing Address Street City State Zip Code
Age Year in High School Phone () Email Address (preferably not a school email)
Parent or Guardian Phone ()
Parent or Guardian email
Emergency Contact (if not parent or guardian listed above) Phone ()

Would you give Sunflower Girls State permission to use any photographs of you on their social media pages? Yes [] No []

ATTENTION: PRINT YOUR 2020 INFORMATION PACKET AT KSGIRLSSTATE.ORG.

\$325 Fee Contributed by

Sponsored by Unit No. Location District
Unit Contact Person

Address Street City State Zip Code
Home Phone () Business Phone () Email Address

DO YOU HAVE A FAMILY MEMBER CURRENTLY SERVING IN THE ARMED FORCES? NO [] YES []
RELATIONSHIP?

DO ANY OF THE FOLLOWING APPLY TO YOU? If "yes", please explain:
PHYSICAL HANDICAP NO [] YES []
MEDICAL CONDITION NO [] YES []
MENTAL CONDITION NO [] YES []
EMOTIONAL CONDITION NO [] YES []
ALLERGIES OR DIETARY LIMITATIONS NO [] YES []

SCHOOL ATTENDED

Signature of School Supt., Principal or Counselor:

I, (Signature of Parent or Guardian) understand that my daughter is to complete the entire session of Sunflower Girls State.

Please attach current Picture here. Signature of Applicant:

SIGNED REGISTRATION FORM MUST BE RETURNED BY MAY 1st via MAIL OR EMAIL TO: secretaryksgirlsstate@gmail.com OR: KS Girls State Amy Stotts PO Box 462 Lawrence, KS 66044

Fee included with registration? Yes [] No [] (mailed separately)

Upon completion and submission of this form to the Secretary of Sunflower Girls State, you're registered and accepted to attend this year's session.

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Questions? Please contact Rachel Barnes, Director secretaryksgirlsstate@gmail.com 620-728-9840