78th session of Keystone Girls State 2024 Citizen Application

Shippensburg University, June 16 - 21, 2024 Application Deadline: May 25, 2024

GENERAL INFORMATION:

The American Legion Auxiliary's Keystone Girls State is a week-long program designed to educate Pennsylvania's young women on our nation's government and its foundation in Americanism, leadership and moral character. Throughout the week, citizens will hold elected positions at the city, county, and state levels along with writing, debating, and voting on legislation in House and Senate sessions. Within their cities, citizens create ordinances, and in turn, prosecute any lawbreakers in a mock trial format. As a city business manager, citizens have the opportunity to develop entrepreneurialism and gain personal experience with a free market economy. Moreover, citizens will travel to the state Capitol to meet the governor and sing the national anthem. Most importantly, citizens will develop relationships that will last a lifetime!

ELIGIBILITY INFORMATION:

High school girls eligible to participate in the ALA Girls State/Girls Nation programs must have completed their junior year of high school and have at least one semester of high school remaining. They must also be a United States citizen or legal resident of the United States as evidenced by a current and/or valid birth certificate, visa, passport, Green Card or other United States government-issued documentation verifying a legal presence in the United States for at least the duration of the ALA Girls State/Girls Nation program.

The total cost to attend is \$300. Auxiliary Units or a sponsor will remit the \$200 sponsor fee. The citizen's family is responsible for a **non-refundable \$100** administrative fee to be sent to sponsoring unit. If you are sponsored and do not attend you are responsible to reimburse \$200 to your sponsor. If you are involved with your local Auxiliary Unit, please speak with them about your desire to attend the program and if they are willing to sponsor your week at KGS. If you are not aware of your local Unit, however, you may email us at <u>kgsalapa@gmail.com</u> and we will match you with an Auxiliary Unit in your region. However, if you would like to bypass the process of obtaining an Auxiliary Unit sponsorship, you may directly pay your \$300 fee.

Name:				Date of Birth://				
	NITIAL)							
Mailing address: _								
	(STREET)	(CI	ΓY)			(STATE	E)	(ZIP)
Citizen's Email: _	Citizen Phone							
Name of High Sch	nool:					_		
GPA ·	Current (Grade (circle	one).	Junio	r Se	nior		
GPA:		Grade (circle					271	
GPA: Circle your preferi		Grade (circle S					3XL	
Circle your preferi		S	М	L	XL	2XL		

PARENT/GUARDIAN INFORMATION:

Name:	
Relationship:	
Phone #: Email:	
Is this contact the emergency contact (circle one)? Yes	No
If not, please provide emergency contact information	
Emergency Contact Name:	Relationship:
Emergency Contact Phone #:	
Travel/Transportation Plans for Students to Attend: Plea	ase check one option below:

□ Personal transportation via parent/guardian □ Citizen will be driving herself

□ Other: ____

PARTICIPANT AND PARENTAL ACCEPTANCE:

Keystone Girls State participants along with your parent or guardian(s), please read, date, and sign this form. Please note no application will be accepted without this form completed and signed.

We understand and accept the following eligibility requirements: Initial after each statement.

- I understand that my participation in the American Legion Auxiliary Girls State program is a privilege, and I will actively participate in all activities and fulfill my responsibilities at ALA Girls State in every capacity to which I may be assigned.
- I will abide by the rules of the American Legion Auxiliary Girls State. I will obey the code of conduct of the facility where ALA Keystone Girls State is held and conduct myself professionally at all times and at all program venues.
- I will be fair, honest, and cooperative in all interactions with my fellow ALA Girls State • citizens and staff. I will respect the judgment and authority of the ALA Girls State staff. I will participate in all flag and patriotic ceremonies conducted during ALA Girls State.
- I hereby authorize the American Legion Auxiliary (ALA) to publish my name, state, and/or any photographs/video taken of me individually or in groups for use in ALA publications, ALA print, online, and video-based marketing materials, and ALA social media. I hereby release and hold harmless the ALA from any reasonable expectation of privacy or confidentiality associated with any images of me as described above that may be used in ALA print, web-based, and social media.
- I acknowledge that I will not receive financial compensation of any type associated with the taking or publication of any images of me as described above that may be used in ALA print, web-based, and social media. I acknowledge that publication of any images of me as described above confers no rights of ownership or royalties from anv image/photographs/videos whatsoever.
- I understand that I must enclose a \$100.00 check payable to the sponsor within this • application, which is non-refundable.
- I understand that if my daughter fails to complete her 6-days at the American Legion Auxiliary Keystone Girls State program, I must provide her sponsors with a refund of her sponsorship, amounting to \$200.00.

I confirm that I have read and agree to these terms and conditions, required of all participants in American Legion Auxiliary Girls State.

Citizen Name (printed)

Date

Citizen Signature

Parent/Guardian Name (printed)

Parent/Guardian Signature

IN SUMMARY, I UNDERSTAND THAT:

Citizen:

An American Legion Auxiliary Unit and/or other sponsors have paid the fees for me to attend Keystone Girls State. I will enclose a check of \$100.00 payable to the sponsor or a \$300 check to the Department of PA. This is not a camp, but rather a simulated government immersive learning experience. I do hereby agree to be in attendance the entire session and to conduct myself according to all rules and regulations established for the governing of the Keystone Girls State. I certify that all information above was thoroughly read and understood and that all information provided about the student and parent/guardian is correct. In signing below, I verify that all statements checked above hereby declare my consent to the stipulations and guidelines set by the American Legion Auxiliary Keystone Girls State.

Parent/Guardian:

I understand that I must provide a refund of the sponsorship amount (\$200.00) to the American Legion Auxiliary Unit or sponsor that intends to sponsor my daughter if she does not complete the ALA Girls State program. I give permission for my daughter's name, picture, and/or voice to be used in the promotion of this program in video, in print, and on the internet. I certify that all information above was thoroughly read and understood and that all information provided about the student and parent/guardian is correct. In signing below, I verify that all statements initialed above are accepted and hereby declare my consent to the stipulations and guidelines set by the American Legion Auxiliary Keystone Girls State.

Citizen Signature

Parent/Guardian Signature

BIOGRAPHY & PHOTO:

Please include a brief (3-5 sentences) biography and a photo of yourself in your application.

4

Date

Date

Date

APPLICATION DEADLINE MUST BE POSTMARKED BY MAY 25, 2024

IF YOU DO NOT HAVE A SPONSOR OR WOULD LIKE TO SPONSOR YOURSELF: PLEASE EMAIL: <u>kgsalapa@gmail.com</u>

For questions or more information, email us at kgsalapa@gmail.com.

If you cannot attend the program, you must notify your sponsor and the Keystone Girls State Chairperson *as soon as possible and no later than two weeks prior* to the start of the 2024 program on June 16th. Failure to do so will result in reimbursing your sponsor \$200.

TO BE COMPLETED BY SPONSOR

The Unit, Council, District, Post, other

Name and Number of Sponsor: _____

Address: _____

President/Commander:

Unit Girls State Chair: _____

Citizen fee \$100.00 made payable to the sponsor, sponsor fee is \$200.00. PLEASE send only one check for \$300.00 payable to:

American Legion Auxiliary, Department of PA

P.O. Box 1285

Camp Hill, PA 17001

or

I have opted to pay my citizen in full, enclosed is my full application with a \$300.00 check payable to the American Legion Auxiliary, Department of PA

TO BE COMPLETED BY AMERICAN LEGION AUXILIARY DEPARTMENT OFFICE:

 Sponsor:

 Section:
 W___C___E___

Council: _____

Party:

NATIONALIST_____ FEDERALIST_____

Date Received	/	/

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