AIR FORCE YOUTH PROGRAMS REGISTRATION

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 U.S.C. 8012 and 44 U.S.C. 3101.

AF IMT 88, 20051124, V1

PRINCIPLE PURPOSES: To register dependent youth of military, retired and DoD personnel in the Air Force Youth Programs. Providing Youth Programs the authorization for medical treatment in emergency situations; authorization for transportation; record youth/family information; photo use authorization; and releasing of liability.

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ROUTINE USES: This form may be disclosed to any DoD component or part thereof, and upon request to other Federal, State and local government agencies in the pursuit of their official duties; disclosed to news media; used for other lawful purposes including law enforcement and litigation.

DISCLOSURE IS VOLUNTARY: Failure to provide the information may preclude the individual from participation in Air Force sponsored youth programs.

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YOUTH NAME LAST, FIRST, MI	SPONSOR NAME / RA LAST, FIRST	NK SPOUSE NAME / LAST, FIRST	RANK EMERGENCY CONTACT OTHER THAN PARENT	
BIRTHDATE / AGE	ORGANIZATION	HOME ADDRESS	EMERGENCY PHONE SAME AS CONTACT	
MALE / FEMALE	WORK PHONE	WORK PHONE	PHOTO PERMISSION YES / NO	
YOUTH HOME EMAIL	CELL PHONE	CELL PHONE	SPONSOR WORK EMAIL	
HOBBIES & INTERESTS	SPONSOR SS # (LAST 4)	HOME PHONE	PARENT VOLUNTEER YES / NO	
SPECIAL NEEDS CARE / ILLNE MEMBERSHIP IS ONLY REFUNI				
Facility or any other medical facility when a U. HOLD AND SAVE HARMLESS AGREEMENT: follows: We the parents of the above named Fund, Department of the Air Force and the co agrees to save and hold harmless the contract of the acts of participating in the program.	authorize my child to receive eme S. Military Medical Facility is not Now therefore, in consideration youth agree to save and hold h intractor from and against any are ctor and all other parties involved	avaliable. of mutual covenants and agreements are as well as defend the Band all claims, demands, actions, did from and on account of damages	rer it is deemed necessary at any U.S. Military ents between the parties here to it is agreed as see Youth Programs, Services Division's Central Base ebts, liabilities and attorney's fees. Parent further of any kind which the youth may suffer as a result from any events that I am notified of in advance.	
SIGNATURE OF PARENT/LEGAL GUARDIAN DA		DATE		
FOR	USE BY YOUTH PROG	RAM STAFF (COMPLE	TE & INITIAL)	
PROGRAM ORIENTATION DATE	MEMBERSHIP CA	ARD ISSUE DATE	MEMBERSHIP CARD NUMBER	
EXPIRATION DATE	MEMBERSHIP FE	EE PAID	STAFF INITIAL / DATE	

PREVIOUS EDITION IS OBSOLETE