

*Pearls of Service Foundation Incorporated*

# IVY LEAGUE

Investing **V**alues in our **Y**outh through **LEA**dership, **G**uidance **U**nity and **E**mpowerment

Name _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Cell phone _____
Email _____

School _____	Grade _____
Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Birth _____
List your hobbies/interests/extracurricular activities:	
_____	
_____	
List one extraordinary event or activity you have participated in or achieved:	
_____	

After graduation from high school, what are your goals?
_____
_____

Parent/Guardian Information:
Name _____
Telephone _____ Cell phone _____
Email _____

**Your \$50.00 non-refundable Sponsorship for each membership is Tax Deductible**



Consent Form

I hereby request and consent that my child or ward,

\_\_\_\_\_ be permitted to participate in the Pearls of Service Foundation, Inc Ivy League.

I further understand that this program is for enhancing leadership development, making wise life decisions, volunteering service in the Memphis community and cultivating youth. My child or ward may be photographed, and/or mentored, by a member of Pearls of Service Foundation Inc, or its' designee associated with this program. By signing below, I release Pearls of Service Foundation Inc – Ivy League, its' members and other volunteers associated with this program from any liability or any injury, loss, or damage connected in any way whatsoever with participation in this program.

I, \_\_\_\_\_, as a participant in the Ivy League - pledge to follow any conduct rules and acknowledge that my failure to obey rules and requirements may result in my removal from the program.

Signature of Participant \_\_\_\_\_

Signature of Parent(s) \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Please send completed applications by August 5, 2023 to  
Pearls of Service Foundation, Inc.  
c/o Ivy League  
P.O. Box 172007  
Memphis, TN 38187