



Leon County Teen Court
301 South Monroe Street, 225
Tallahassee, Florida 32301

TEEN COURT VOLUNTEER INFORMATION

Please Print Neatly

Today's Date: ____/____/____

Please notify Teen Court Staff if your information changes while volunteering at Teen Court.

Volunteer Name: _____
Last First Middle Initial

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Date of Birth: _____ Current Age: _____ Male Female

Current Grade: _____ School Currently Attending: _____ High School Graduation Year: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact #1: _____
Name Relationship to Student

Phone: _____ Other Phone: _____ Email: _____

Emergency Contact #2: _____
Name Relationship to Student

Phone: _____ Other Phone: _____ Email: _____

I am aware of the Teen Court Dress Code, Courtroom Demeanor, and the Oath of Confidentiality. I am aware that a violation of any of these rules may result in loss of credit for service or suspension from Teen Court.

MEDIA RELEASE

(Optional)

Leon County Teen Court requests permission to take photos and video during Teen Court events. These pictures and video may be used as visual aids on the program's website as well as brochures advertising Teen Court. Video and photos may also be used as part of presentations for the recruiting and training of new and future Teen Court Volunteers as well as for school classes participating in mock trial activities.

I, the undersigned, do hereby grant permission to Leon County Teen Court to use the photo or video image of my child, _____ . Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Teen Court Web site. I agree that these images may be used by Leon County Teen Court for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

Parent/Guardian signature _____ Date _____