

# YES PROGRAM APPLICATION

The easiest way to apply for the YES Program is online at [www.moontownfoundation.org](http://www.moontownfoundation.org). Or, fill out this application and email it along with the \$95 non-refundable application fee.

## NAME

First \_\_\_\_\_ Last \_\_\_\_\_ Middle \_\_\_\_\_ Preferred \_\_\_\_\_

## PERMANENT ADDRESS

Street (include apt., box, etc.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Temporary Phone Number \_\_\_\_\_

E-mail address \_\_\_\_\_

Birthdate \_\_\_/\_\_\_/\_\_\_\_\_ Age \_\_\_\_\_ Sex F M Height \_\_\_\_\_ Weight \_\_\_\_\_

Citizen of \_\_\_\_\_ Names and ages of siblings \_\_\_\_\_

## ETHNIC ORIGIN (Optional. Your response will help us meet student needs more effectively.)

*U.S. citizens:*  American Indian/Alaska Native  Native Hawaiian/Pacific Islander  Asian  Black or African American  
 Hispanic  White  Two or more races  Other \_\_\_\_\_

*Non-U.S. citizens:* Please specify your race/ethnicity \_\_\_\_\_

## HOW DID YOU HEAR ABOUT YES?

YES Graduate (who?) \_\_\_\_\_  YES Instructor (who?) \_\_\_\_\_

YES Parent (who?) \_\_\_\_\_  YES Staff (who?) \_\_\_\_\_

Magazine/newspaper article  Television program  Educational consultant

Conference/trade show  Parent/friend  Web search  School counselor or teacher

## EDUCATION AND WORK HISTORY

Current or last school attended \_\_\_\_\_

Are you currently enrolled  Yes  No If yes, estimated year of completion: \_\_\_\_\_

Highest level completed (check one):  H.S. Diploma  B.A./B.S. Other \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_ Industry \_\_\_\_\_

**PARENT/LEGAL GUARDIAN INFORMATION** (required for students age 18 or younger)

**Mother** (Mrs., Ms., Dr.) or  **Legal Guardian 1**

**Father** (Mr., Dr.) or  **Legal Guardian 2**

Address is the same as the student’s permanent address.

Address is the same as the student’s permanent address.

First name	Last name	Middle Initial
Street (include apt., box, etc.)		
City	State	Zip Code
Home Phone Number	Work Phone Number	
Cell Phone Number		
E-mail		
Employer	Title	

First name	Last name	Middle Initial
Street (include apt., box, etc.)		
City	State	Zip Code
Home Phone Number	Work Phone Number	
Cell Phone Number		
E-mail		
Employer	Title	

**STUDENT QUESTIONNAIRE**

This questionnaire is designed to help you identify your reasons for electing to pursue a YES course, while providing us with an opportunity to get to know you better.

What has been your greatest success in the last six months? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A YES course is very physically and mentally demanding. Describe your regular physical activities or sports, including what types of exercise you do, how often and for how long. If you do not exercise regularly, tell us how you plan to prepare for your course.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A YES course requires that all participants commit physically, mentally, and emotionally to the success of the program. Identify an activity to which you have made a major commitment. Describe how you demonstrated that commitment. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERSON TO NOTIFY IN CASE OF AN EMERGENCY** (required for all applicants)

Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Street (include apt., box, etc.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Relationship to applicant (check one):  Parent  Guardian  Other relative

I have read, understand, accept and agree to abide by the rules, policies and guidelines set forth in this application. I understand that the relationship between me and YES will be governed by the substantive laws of the State of Washington and any suit, mediation or arbitration of any dispute with YES must be filed exclusively in the State of Washington. I understand that I am not accepted on my course until all enrollment forms have been received and approved by the YES Admission Office. I give YES permission to share my contact information with other YES students or graduates and/or with environmental organizations or strategic partners in which YES graduates may be interested. I also give YES permission to use my name, contact information and picture in promotional materials and press releases.

Signature of Applicant \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

Signature of Parent or Guardian is also required, to reflect agreement, if applicant is under 18 years of age:

\_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

Applications without the application fee will not be processed. Complete the credit card information below or attach the 95application fee, payable to Moontown Foundation, to the front of application and forward to:



Moontown Foundation  
YES Program Admissions  
11021 NE 123<sup>rd</sup> Lane  
Suite #C208  
Kirkland, WA 98034  
(206) 201-2314  
[admissions@moontownfoundation.org](mailto:admissions@moontownfoundation.org)

Please charge my application fee to my  VISA  MasterCard  Other

Name on card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Account number: \_\_\_\_\_