



Girls' Leadership Council
2019-2020
Enrollment Form

Submit completed form to: bsusana@seethegirl.org or fax it to 904-598-0902

Member Name (First, Last) _____ D.O.B. _____

Member cell _____ Member email _____

Member food allergies _____

Primary contact (guardian if under 18 years of age): First, Last Name _____

Cell _____ Email _____

Secondary Contact: First, Last Name _____ Relationship _____

Cell _____ Email _____

What careers/subjects would you like to learn more about? _____

What skills would you like to learn (public speaking, yoga, etc.)? _____

What group activities/fieldtrips are you interested in making part of the program? _____

What causes are you passionate about? _____
