



**Chesterfield Township Junior Law Enforcement Academy**  
**APPLICATION**  
**(Due May 29, 2018)**

GENERAL INFORMATION		
NAME:		
ADDRESS:		
SCHOOL:		
GRADE:		
GENDER		
D.O.B.		
T-SHIRT SIZE:		YOUTH or ADULT <i>(circle one)</i>
SHORTS SIZE:		YOUTH or ADULT <i>(circle one)</i>

EMERGENCY CONTACT INFORMATION	
<b>NAME:</b>	
PHONE #:	RELATIONSHIP:
<b>NAME:</b>	
PHONE #:	RELATIONSHIP:
MEDICAL INFORMATION	
<b>MEDICAL LIMITATIONS OR KNOWN ALLERGIES:</b>	

Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

\*\* Selected applicants will be notified. \*\*