



**BLACKS IN GOVERNMENT (BIG)
NATIONAL ORATORICAL COMPETITION**

Participant Background Information
(Please Print)

Student's Name: _____ Age: _____

Address: _____ City/State/Zip _____

Parent/Legal Guardian Name: _____

Phone: (day) _____ (night) _____

Email address: _____

If I cannot be reached, please notify _____ Phone: _____

Please list any food allergies: _____

Medical Insurance Company _____ Policy # _____

Is the student currently taking medicine or treatment? ___ Yes ___ No

If yes, explain: _____

Parent/Guardian Signature: _____ Date: _____

NOTE: This form is required and must be completed on each regional winner and submitted to the National Program and Planning Chair along with all other required documents.



**BLACKS IN GOVERNMENT (BIG)
NATIONAL ORATORICAL COMPETITION**

PARENTAL AUTHORIZATION (PARENT OR GUARDIAN)

(This form must be completed for each Regional 1st place winner.)

I hereby give permission for _____ to take part in the following activities:

- Round trip travel from my child's residence to BIG's National Training Institute (NTI) in New Orleans, LA.
- Stay at the designated hotel in New Orleans, LA, arriving **Tuesday, August 5, 2025** and departing on **Friday, August 8, 2025**.
- Participation in BIG's Oratorical Competition.
- Participation in and attend youth events sponsored by the National Organization of BIG; and
- Participation in and attend NTI workshops and other social events.

So that my child can participate in BIG's Oratorical Competition, I agree to the following:

I give permission for my child to participate in the activities sponsored above by the National Organization of BIG. I hereby release BIG and its members from responsibility and liability for any illness or injury that my child may sustain during this activity. I agree that if I am present in New Orleans, LA, I will supervise my child when the activities noted above are taking place. If I cannot be contacted in an emergency, I authorize that emergency treatment may be administered. I agree and certify that my child understands that he/she must abide by any guidelines set forth by BIG and certify that my child is mature enough to understand and abide by restrictions imposed upon him/her if I am not at the conference. I hereby release BIG and its members from responsibility and liability for my child's negligent and intentional acts. I release BIG and its members from responsibility and liability for the negligent or intentional acts of third parties that harm my child. I fully understand and agree to the terms of this agreement and have been given the opportunity to ask questions regarding this release before signing the agreement.

Parent/Guardian Signature: _____ Date: _____

NOTE: This form is required and must be completed on each regional winner and submitted to the National Program and Planning Chair along with all other required documents.