



We understand the following to be the terms of affiliation between

Name of PRIDE team: _____

and PRIDE Youth Programs

Our PRIDE Youth Team agrees to:

- ◆ Pay an annual affiliation fee of \$100 per team to be paid initially with the return of this contract.
- ◆ Uphold the philosophies and standards established by PRIDE Youth Programs for our youth team.
- ◆ Adhere to the graphic standards as established by the PRIDE Youth Programs office. This includes wearing official performance clothing purchased from PYP when conducting out-reach programming and activities.
- ◆ Submit the following information to the PRIDE Youth Programs office at the end of each month:
 - News clippings and other team publicity or recognition.
 - Team activity forms with contact person's name and phone number.
- ◆ Contribute materials, scripts, raps, fliers, promotional pieces developed by the team or those associated with the team to PRIDE Youth Programs.
- ◆ Pay annual membership fees for each member of the PRIDE Youth Team.
 - Youth I (for individuals in grades K-5) \$5.00
 - Youth II (for individuals in grades 6-12) \$10.00
 - College Student \$15.00

PRIDE Youth Programs agrees to:

- ◆ Supply performance clothing, audio/video tapes, and other program materials to teams at a discounted cost.
- ◆ Host the annual PRIDE World Drug Prevention Conference and offer discounted registration fees to PRIDE members.
- ◆ Compile new skits, songs, lessons and activity plans, and other resources annually.
- ◆ Publish an online bi-monthly newsletter highlighting team activities worldwide.
- ◆ Refer PRIDE Youth Program presentation and training requests to local PYP teams.
- ◆ Maintain an up-to-date website offering a wide range of information and services.
- ◆ Provide customized training upon request.
- ◆ Provide technical support via online, telephone and in person.



Any team that does not pay their affiliation fee or individual memberships by October 1st of each calendar year will not be considered a national affiliate and shall not represent PRIDE Youth Programs in any way. Upon receipt of this contract and the affiliation fee, PRIDE Youth Programs will mail a certificate of team affiliation and signed copy of this contract.

As a PRIDE Youth Programs Advisor, I agree to the terms of this contract:

Signature of Advisor: _____

Advisors Name: (print please) _____

Team Level: **PRIDE Pals** **Club PRIDE** **America's PRIDE** **PRIDE Unlimited**

Official Name of Team: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Ph. () _____ Work Ph. () _____

Fax #() _____ E-mail: _____

Date first trained (month & year) _____ Trained by: _____

Renewal **New Team** (please check one) Taxpayer ID# _____

Signature of Assistant Advisor: _____

Assistant Advisor's Name: (print please) _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Ph. () _____ Work Ph. () _____

Fax #() _____ E-mail: _____

Complete this contract and mail with \$100 affiliation fee to: PRIDE Youth Programs, 4 West Oak Street, Fremont, MI 49412. A signed agreement will be returned to you.

Check# _____ P.O.# _____

Credit Card# _____ Exp. _____ VISA MASTERCARD

Billing Address: _____

Signature of card holder: _____

Print name as it appears on credit card: _____

Office Use Only:

PYP Youth Director's Signature: Date:

Payment received _____ Amount \$ _____

