2026 NATIONAL IWLA CONVENTION
Youth Convention Registration Form

Hosted by: Minnesota Division, Izaak Walton League of America
In partnership with: Minnesota Valley Chapter, IWLA

2026 National IWLA Convention — Youth Convention Registration
This form is for participation in the Youth Convention (Ages 8–18), including:

- Youth Participants
- Junior Counselors
- Counselors / Youth Leaders

Location: **Minnesota Valley Chapter, IWLA**
6601 Auto Club Road
Bloomington, MN

IMPORTANT — READ BEFORE REGISTERING

This form is ONLY for the Youth Convention. The following programs are registered separately:

- ELF (Ages 5–8)
- Green Crew Summit (Ages 14–21)
- Zoo Adventures and other ancillary activities

REQUIRED FORMS

After registering, participants must complete:

- Youth Permission, Waiver & Media Release
- Youth Health & Medical Form

CONTACT INFORMATION:

Participant Name_____ Date of Birth: _____

School (if applicable) _____

Age at time of Convention (must be 8–18 unless Counselor) _____

Select your role in the Youth Convention:

☐ Youth Participant (Ages 8–14) ☐ Youth Participant (Ages 14–18)

☐ Junior Counselor (Ages 14–17) ☐ Counselor / Youth Leader (18+)

IF YOUTH PARTICIPANT

Select areas of interest (used for scheduling):

☐ Environmental Leadership ☐ Conservation Skills

☐ Outdoor Exploration ☐ Team Activities

IF JUNIOR COUNSELOR (14–17)

Have you participated in any of the following?

☐ Previous Youth Convention ☐ Green Crew

☐ Scouting (BSA, GSUSA, etc.) ☐ Environmental or leadership programs

☐ Other: _____

Describe your leadership or mentoring experience:

_____

_____

Role Interest

☐ Working with younger youth ☐ Supporting activities

☐ Assisting staff ☐ Leading small groups

IF COUNSELOR / YOUTH LEADER (18+)

Have you worked with youth before?

☐ Yes ☐ No

If yes, describe: _____

_____

_____

Certifications (IMPORTANT)

Do you hold any of the following?

☐ First Aid ☐ CPR ☐ Lifeguard / Lifesaving ☐ Wilderness First Aid ☐ Other: _____

Certification Details (provider, expiration if known):

_____

_____

Leadership Preferences

☐ Lead small groups ☐ Support activities ☐ Safety / supervision support ☐ Flexible

FRIDAY OVERNIGHT OPTION

The Youth Convention includes an optional Friday night overnight experience. Do you plan to participate in the Friday overnight?

☐ Yes ☐ No ☐ Not sure yet (Additional details and expectations will be provided prior to the event.)

PARTICIPANT INPUT (YOUTH VOICE)

What are you most excited about? _____

_____

What do you hope to learn or experience? _____

_____

PARENT / GUARDIAN INFORMATION (UNDER 18)

Parent/Guardian Name _____ Phone _____ Email: _____

Emergency Contact (if different):

Name _____ Phone _____ Email: _____

PARTICIPANT CONTACT (18+ ONLY)

Phone _____ Email: _____

Emergency Contact (if different):

Name _____ Phone _____

Will you use provided transportation between the Convention Hotel and the Minnesota Valley Chapter location?

☐ Yes ☐ No ☐ Not sure

☐ I understand that the following forms are required for participation:

- Youth Permission, Waiver & Media Release
- Youth Health & Medical Form

COMMUNICATION CONSENT

☐ I agree to receive event-related communications (schedule, updates, logistics)

SIGNATURE

Participant Name: _____ Participant Signature: _____ Date: _____

Parent/Guardian Name (if under 18): _____ Parent/Guardian Signature: _____

Date: _____