*Chris Anoatubby*
*Governor*

the Chickasaw Nation

***Department of Culture and Humanities / Chickasaw Cultural Center Division***
*867 Cooper Memorial Road / Sulphur, OK 73086 / (580) 622-7140*

# Chikasha Himitta' Hilha' (Chickasaw Young Dancers) Application

Date: _____

**Applicant information:**

Name: _____
First Middle Last Suffix

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Home phone no.: (_____) _____ Cell phone no.: (_____) _____

Email address: _____

Birth date: _____ Age: _____ Gender: ☐ Male ☐ Female

Allergies to medications or food: _____

Emergency contact name: _____

Emergency contact phone no.: (_____) _____

Shirt size:

☐ Kid's ☐ Small ☐ Medium ☐ Large

☐ Youth ☐ Small ☐ Medium ☐ Large

☐ Adult ☐ Small ☐ Medium ☐ Large ☐ X-large ☐ 2XL ☐ 3XL

**Code of conduct:**

**While representing the Chickasaw Nation as a Chikasha Himitta' Hilha' member, the undersigned Chikasha Himitta' Hilha' member will abide by the following standards and rules of conduct:**

- Chikasha Himitta' Hilha' members will follow the directions of the cultural resources designee.
- No Chikasha Himitta' Hilha' member will make public or private statements or actions on behalf of the Chickasaw Nation on any matters concerning the Chickasaw Nation or its programs.
- Gossiping is detrimental to all Chikasha Himitta' Hilha' members and will not be tolerated.
- The use of alcohol and drugs is prohibited.
- No offensive language or images on clothing.
- No smoking in the vehicles.
- Derogatory language, harassment, and bullying will not be accepted.
- Chiksha Himitta' Hilha' members receiving per diem are required to pay their meal expenses.
- Regalia for performances will be determined by the appropriate delegate based on the event.
- Chikasha Himitta' Hilha' members will be dressed and ready to perform in on time.
- Chiksha Himitta' Hilha' members will adhere to the itinerary that has been established by the coordinator.
- Chikasha Himitta' Hilha' members will remain respectful of individual and cultural diversity.

- Chikasha Himitta' Hilha' members are to conduct themselves in a professionally and positively at all Chikasha Himitta' Hilha' functions and events.
- Chikasha Himitta' Hilha' members will be on time for event departures.
- If Chikasha Himitta' Hilha' members do not follow these guidelines they may be dismissed and will be asked not to attend practices, events, or gatherings.

**Violation of the code of conduct may result in an individual being deemed ineligible to participate in Chikasha Himitta' Hilha' meetings and events.**

**Acknowledgements and attestations:**

1. I understand that as a member of the Chikasha Himitta' Hilha', my child may be photographed, recorded, filmed and/or videotaped by employees or agents of the Chickasaw Nation for promotion of the Chikasha Himitta' Hilha' or in any publication of the Chickasaw Nation. I hereby grant my permission for such use on behalf of my child. I understand that by granting my permission neither I nor my child will have the rights to approve any such photograph, recording, film, or video. Further, neither I nor my child will be due any additional compensation for the use of such photograph, recording, film, or video. Neither I nor my child will be entitled to any other claims arising out of any uses of said photograph, recording, film, or video.

2. I understand that the Chikasha Himitta' Hilha' may travel within the state of Oklahoma and out of state.

3. I will hold harmless the Chickasaw Nation, its affiliates, officers, employees, representatives, and assigns from any and all liability, claims, suits, demands, losses, or damages caused by or arising out or resulting from my and my child's participation in the Chikasha Himitta' Hilha' activities.

4. I understand and acknowledge that as a member of Chikasha Himitta' Hilha', my child is an ambassador of the Chickasaw Nation. I understand and acknowledge that my child's failure to abide by the code of conduct located on Page 1 of this application may result in their ineligibility to participate in Chikasha Himitta' Hilha' or their dismissal from Chikasha Himitta' Hilha'.

Parent/ legal guardian signature

Date

# Parent/Legal Guardian Consent Form
# Medical Permission

I am the parent/legal guardian of _____, a minor child. I hereby give my consent and approve of the participation of my child in Chikasha Himitta' Hilha'.

In the event my child should require medical attention, I hereby grant my permission to the Chickasaw Nation Cultural Resources employees to seek medical attention for my child and consent to my child receiving medical attention during any event in which the Chikasha Himitta' Hilha' is participating. I acknowledge that the Chickasaw Nation, its employees, associates, or agents are not liable for any act leading up to or arising from such an event.

_____ _____ (___) _____
Parent/ legal guardian signature | Date | Phone no.

_____ _____ _____
Witness printed name | Witness signature | Date

_____ (___) _____
Emergency contact name | Phone no.

Current medications (please list): _____

_____

_____

Known allergies (food, medication, latex, etc.) (please list): _____

_____

_____