



Dear Parent/Guardian,

Bright Futures invites your child to participate in our One-to-One mentoring program. At One-to-One, high school or adult mentors eat lunch with a mentee once a month at the child's school.

The one-to-one relationship provides youth with a positive role model. Each mentor and mentee are matched based on similar interests and preferences. Bright Futures will provide the lunches for program participants.

All mentors undergo a vetting process before being paired with a child. We conduct interviews, reference checks, social media checks, and checks with high school staff to vet our high school mentors. For all adults, we also do background checks. All mentors receive training.

Interactions between a mentor and a child only happen at the child's school during the monthly lunch in a supervised setting.

Bright Futures is a nonprofit organization with a mission of developing a healthy, successful youth community by building mentoring relationships between positive role models and youth. Our goals focus on mentoring, teaching, developing self-worth, and encouraging social connections.

To enroll your child in the One-to-One program, please complete the application and return it to your child's school counselor OR to Diane Ballard, Program Director. Your child may be placed on a waiting list should a mentor not be available.

Thank you for considering One-to-One for your child.

Sincerely,

Diane Ballard  
Program Director

(307) 527-6688  
P.O. Box 265, Cody, WY 82414  
[brightfuturesmentoring@gmail.com](mailto:brightfuturesmentoring@gmail.com)  
[www.brightfuturesmentoring.com](http://www.brightfuturesmentoring.com)



## MENTEE APPLICATION

| YOUTH INFORMATION                                                                          |                                         |         |
|--------------------------------------------------------------------------------------------|-----------------------------------------|---------|
| First Name:                                                                                | Last Name:                              |         |
| Cellphone Number:                                                                          | <input type="checkbox"/> don't have one |         |
| Home Phone Number:                                                                         | <input type="checkbox"/> don't have one |         |
| Home Address:                                                                              |                                         |         |
| E-mail Address:                                                                            | <input type="checkbox"/> don't have one |         |
| School:                                                                                    | Grade:                                  |         |
| Birthday (month/day/year):                                                                 | Age:                                    | Gender: |
| T-Shirt Size (circle one):                                                                 | Adult – XS S M L XL XXL XXXL            |         |
| Do you have any allergies? No Yes --- What?:                                               |                                         |         |
| Do you have any dietary restrictions? No Yes --- What?:                                    |                                         |         |
| Do you have any circumstances or special needs we should know? No Yes --- please describe: |                                         |         |
|                                                                                            |                                         |         |
|                                                                                            |                                         |         |
|                                                                                            |                                         |         |

| Permission to Participate                                                                                                  |             |
|----------------------------------------------------------------------------------------------------------------------------|-------------|
| I (parent/guardian) _____ give permission for my child/ward<br>_____ to participate in Bright Futures' One-to-One program. |             |
| Parent / Guardian Signature: _____                                                                                         | Date: _____ |

| <b>PARENT/GUARDIAN INFORMATION (1)</b> |                                         |
|----------------------------------------|-----------------------------------------|
| First Name:                            | Last Name:                              |
| Cellphone Number:                      | <input type="checkbox"/> don't have one |
| Home Phone Number:                     | <input type="checkbox"/> don't have one |
| Home Address:                          |                                         |
| E-mail Address:                        | <input type="checkbox"/> don't have one |

| <b>PARENT/GUARDIAN INFORMATION (2) (if applicable)</b> |                                         |
|--------------------------------------------------------|-----------------------------------------|
| First Name:                                            | Last Name:                              |
| Cellphone Number:                                      | <input type="checkbox"/> don't have one |
| Home Phone Number:                                     | <input type="checkbox"/> don't have one |
| Home Address:                                          | <input type="checkbox"/> same as above  |
| E-mail Address:                                        | <input type="checkbox"/> don't have one |

**If you DO NOT want Bright Futures using pictures of your child taken at One-to-One events, you must complete and sign below. (otherwise leave blank)**

I \_\_\_\_\_ hereby **DO NOT** authorize use of pictures of my child  
 \_\_\_\_\_ taken at One-to-One events.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Waiver**

In consideration of participation in Bright Futures One-to-One, I waive any and all claims for myself and my heirs that I may have against Bright Futures Mentoring, its employees, contractors, sponsors, officials, and volunteers for any and all injury or illness which may directly or indirectly result from participation in this program.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We match mentors and mentees with common interests.

Please mark your interests.

**Indoor**

- Arts & Crafts
- Baking
- Board Games
- Card Games
- Computers/Tech
- Cooking
- Crocheting/Knitting
- Drawing/Painting
- Listening to music
- Origami
- Playing an instrument
- Puzzles
- Reading
- Science Experiments
- Scrapbooking
- Sewing
- Singing
- Writing

**Outdoor/Active**

- Baseball
- Basketball
- Fishing
- Football
- Gardening
- Hiking
- Hunting
- Nerf wars
- Recess Games
- Running
- Skateboarding
- Snowboarding
- Soccer
- Swimming
- Tennis
- Trampoline
- Volleyball
- Yoga

**Other**

- Collecting
- Comics
- Drama
- Fashion
- Horses
- LEGOS
- Magic Tricks
- Photography
- Playing with pets
- Recycling
- Superheroes
- Volunteering
- Woodworking
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

# Questions to Get to Know You

Describe yourself in three words.

- 1.
- 2.
- 3.

What are your top three favorite things to talk about?

- 1.
- 2.
- 3.

What would you like to do in your future?

Would you prefer a high school or adult mentor?