



REAL INTERVIEWS.  
REAL OPPORTUNITIES.

# UNLOCK REAL OPPORTUNITIES FOR YOUR STUDENT AT DRAFT DAY!

## BUILDING TOMORROW'S WORKFORCE

### WHAT IS DRAFT DAY?

Be Pro Be Proud's Draft Day is a unique two-part event designed to help high school students take their first step toward a successful career. On Draft Day:

Seniors interview with local businesses for real jobs they can start upon graduation.

Underclassmen get an exciting opportunity to explore a variety of technical career opportunities.

### WHY SHOULD YOUR STUDENT ATTEND DRAFT DAY?

#### Real Interviews with Real Employers

Registered Seniors have the opportunity to interview with local companies for internships, apprenticeships, and full-time positions.

#### Explore Career Options

Underclassmen will be able to explore a wide range of technical careers in the construction, forestry healthcare, manufacturing, transportation, and utility industries.\* The Career Expo is a fantastic way to discover career options and learn about industries that may be of interest.

#### One-On-One Interaction

Students will gain insight into what it's like to work in various industries and roles through one-on-one conversations with company representatives from all levels.

#### Networking for Success

Students will connect with local employers, build their professional network, and get exposure to industries that are both crucial to our economy and offer fulfilling careers with opportunities for advancement and financial stability.

### HOW WILL DRAFT DAY BENEFIT YOUR STUDENT?

**Boost Confidence** – With real-world interaction and professional experience.

**Inspire Career Pathways** – Discover technical careers that may be a perfect fit for their skills and interests.

**Prepare for the Future** – Equip your student with the knowledge and tools needed to succeed in today's competitive workforce.

### DON'T MISS THIS OPPORTUNITY!

Give your student the chance to explore career options, connect with employers, and take a step toward building a bright future.

\*Industry representation varies by Draft Day Location.

### FOR MORE INFORMATION

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# PERMISSION FORM

## SECTION I. BE PRO BE PROUD PERSONAL LIABILITY AND MEDICAL RELEASE

I hereby release Be Pro Be Proud, its representatives, agents, employees, volunteers, and vendors from liability for any injury to the named person(s) below, resulting from any cause whatsoever occurring to the named person(s) at any time while attending this Be Pro Be Proud's Draft Day event, including travel to and from the host site, excepting only such injury or damage resulting from willful acts of Be Pro Be Proud representatives, agents or employees. I voluntarily assume all risk and danger relating to my child's participation in Draft Day 2023, whether occurring prior to, during or after the event.

I voluntarily authorize my child's/children's supervising teacher, Be Pro Be Proud, or its agents or designers to administer and/or obtain routine or emergency diagnostic procedures and/or routine or emergency medical treatment for the named person(s) as deemed necessary in medical judgment. I, as the parent/guardian of the below-named participant(s) will allow emergency medical treatment to be administered as needed. Any further treatment will require parental/guardian consultation.

I agree to indemnify and hold harmless Be Pro Be Proud, agents, or designees for all claims, demands, actions, rights of action, and/or judgments by or on behalf of the named person arising from medical procedures or treatment rendered in good faith and according to accepted medical standards.

## SECTION 2. AUTHORIZATION OF RELEASE OF PERSONAL INFORMATION THROUGH LEAD RETRIEVAL SYSTEM

Participant information is collected in preparation for and registration in Draft Day 2023 events for the specific purpose of (1) accounting for participation, (2) efforts to pair student(s) with participating employer(s), (3) follow-up after the event by Be Pro Be Proud and those acting on its behalf, and (4) ongoing recruitment or marketing efforts by Be Pro Be Proud Partners, participating employers or post-secondary education providers. Personal information may include your child's name, phone number, email address, or mailing address. By signing below, I acknowledge my understanding of these statements and give consent for contact.

## SECTION 3. PHOTOGRAPHY & SOUND RELEASE

By attending this Draft Day Event, I grant Be Pro Be Proud, and its production companies, permission to photograph my child/ children, videotape or make audio recordings of his or her voice, separately or in combination, and give permission to Be Pro Be Proud to use these photos, videos, or sound recordings without seeking further permission. I understand that my child's/children's name(s) may not appear with a photo, video or sound recording when used.

Further, I relinquish to Be Pro Be Proud all rights, title and interest in any photographs, videos or sound recordings of my child/children and I grant Be Pro Be Proud the exclusive right to exhibit, publish, give or transfer photographs, videotape or audio recordings to any individual, business and industry partner, publication, media outlet or governmental agency, or their assignees, without payment or other consideration to me.

My child's/children's agreement to participate or perform under camera, lighting and stated conditions is voluntary. I waive all personal claims, causes of action or damages against Be Pro Be Proud and its employees, agents, vendors, partners, or volunteers arising from such a performance or appearance.

## PARENTAL STATEMENT OF CONSENT

I have read and completely understand the Personal Liability and Medical Release Statement, the Release of Personal Information Through Lead Retrieval System Statement, and the Photography and Sound Release Agreement, and, by signing below, do hereby agree to abide by these in their entirety, accept the conditions of the agreements, and completely release Be Pro Be Proud. I have provided any/all necessary medical information to my child's school or supervising teacher so that this person may act on my behalf in case of a medical emergency.

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

School Name \_\_\_\_\_

Parent/Guardian Full Name \_\_\_\_\_ Teacher or administrator applicable here.

Parent/Guardian Signature \_\_\_\_\_ Teacher or administrator applicable here.

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_

### FOR MORE INFORMATION

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