

# ABRAZO CHILDREN APPLICATION

2018-2019

The Washington's Birthday Celebration Association (WBCA), in conjunction with the International Good Neighbor Councils (IGNC - Laredo, Texas and Nuevo Laredo, Tamps. Mexico) has the privilege of selecting the two young children to represent the United States and Mexico during the WBCA Celebration at the International Bridge Ceremony. If you have any nominations for the **2018-2019 Abrazo Children** please complete this form and return it to the WBCA office by **THURSDAY, JUNE 28, 2018 NO LATER THAN 5:00 P.M.** The Abrazo Children Committee comprised of two members of WBCA and two members of the International Good Neighbor Council (IGNC) will review all applications and make their recommendations to the WBCA Executive Committee. Notices will be sent out to all those who apply letting them know of WBCA's final selection.

## REQUIREMENTS

Children **MUST** be between the ages of SEVEN (7) and NINE (9) as of **JUNE 1, 2018**, and their parents, grandparents or family members ***MUST be or have been active committee members of either WBCA or IGNC for at least (3) three years.*** Additional consideration will be given to applications that include volunteer service on the Bridge Ceremony Committee or other WBCA committees. Applicants **may** be required to interview with the selection committee. PARENTAL APPLICATION APPROVAL AND REVIEW OF DUTIES AND RESPONSIBILITIES ON PAGES FOUR (4) AND FIVE (5) IS REQUIRED.

## CHILD'S INFORMATION

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
MONTH/DAY/YEAR

IS THIS THE CHILD'S FIRST TIME APPLYING? \_\_\_\_\_ HOW MANY TIMES HAS HE/SHE APPLIED? \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

TELEPHONE: ( ) \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
CELL

GRADE: \_\_\_\_\_ SCHOOL ATTENDING: \_\_\_\_\_

ORGANIZATIONS/CLUBS INVOLVED WITH: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOBBIES: \_\_\_\_\_  
\_\_\_\_\_

## FATHER'S INFORMATION

FATHER'S NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

CURRENT MEMBER OF WBCA/IGNC: \_\_\_\_\_

NUMBER OF YEARS AS MEMBER: \_\_\_\_\_

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WBCA OR IGNC INVOLVEMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW LONG: \_\_\_\_\_

**MOTHER'S INFORMATION**

MOTHER'S NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

CURRENT MEMBER OF WBCA/IGNC: \_\_\_\_\_

NUMBER OF YEARS AS MEMBER: \_\_\_\_\_

WBCA OR IGNC INVOLVEMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW LONG: \_\_\_\_\_

**FAMILY MEMBER INFORMATION**

MATERNAL GRANDFATHER/FAMILY MEMBER: \_\_\_\_\_

CURRENT MEMBER OF WBCA/IGNC: \_\_\_\_\_

NUMBER OF YEARS AS MEMBER: \_\_\_\_\_

WBCA OR IGNC INVOLVEMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW LONG: \_\_\_\_\_

MATERNAL GRANDMOTHER/FAMILY MEMBER: \_\_\_\_\_

CURRENT MEMBER OF WBCA/IGNC: \_\_\_\_\_

NUMBER OF YEARS AS MEMBER: \_\_\_\_\_

WBCA OR IGNC INVOLVEMENT: \_\_\_\_\_

HOW LONG: \_\_\_\_\_

**PATERNAL GRANDFATHER/FAMILY MEMBER** \_\_\_\_\_

**CURRENT MEMBER OF WBCA/IGNC:** \_\_\_\_\_

**NUMBER OF YEARS AS MEMBER:** \_\_\_\_\_

**WBCA OR IGNC INVOLVEMENT:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**HOW LONG:** \_\_\_\_\_

**PATERNAL GRANDMOTHER/FAMILY MEMBER:** \_\_\_\_\_

**CURRENT MEMBER OF WBCA/IGNC:** \_\_\_\_\_

**NUMBER OF YEARS AS MEMBER:** \_\_\_\_\_

**WBCA OR IGNC INVOLVEMENT:** \_\_\_\_\_

\_\_\_\_\_

**HOW LONG:** \_\_\_\_\_

**ADDITIONAL INFORMATION:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I have read and fully understand the duties and responsibilities and expenses associated with my child representing the WBCA and IGNC as an Abrazo child.*

\_\_\_\_\_  
PARENT'S SIGNATURE

\_\_\_\_\_  
DATE

## DUTIES & RESPONSIBILITIES

Parents of selected children should be aware of their obligations and associated expenses. Children will be asked to participate in numerous WBCA approved functions, some being in full costume.

### THE FOLLOWING IS A LIST OF WBCA APPROVED FUNCTIONS THE CHILDREN WILL BE ASKED TO ATTEND: (All events are subject to cancellation or change.)

1. Selection announcement/press conference (*Sunday attire w/sash*)  
*Sometime in August or September - DATE TO BE ANNOUNCED*
2. Photo opportunity for the WBCA program book (*Sunday attire w/sash*)  
*TO BE TAKEN IN JULY AT PETER PAN STUDIOS*
3. Abrazo Children Reception hosted by IGNC (*Abrazo attire – NO SASH*)  
*DATE TENTATIVE (Saturday, January 19th at 6 p.m.)– Subject to Change*
4. Austin/Washington DC Trip to invite state and federal officials to the Celebration (*Abrazo attire w/sash*)  
This visit may require 1 or multiple overnight stays in Austin/DC. Transportation, hotel, and meal expenses are the responsibility of the parents. *Dates still being determined; Austin Trip (last week in January); DC Trip (in March)*
5. Commander’s Media Reception (*Abrazo attire- NO SASH*)  
*Thursday, January 24, 2019 - Laredo Energy Arena*
6. Youth Dance Festival (*Casual attire w/sash*)  
*Saturday, February 9, 2019*
7. IBC Youth Parade Under the Stars (*Abrazo attire – NO SASH*)  
*Thursday, February 21, 2019*
8. Practice session for the International Bridge Ceremony (*Normal attire*)  
*DATE TO BE ANNOUNCED*
9. International Bridge Ceremony (*Abrazo attire- NO SASH*)  
*Saturday, February 23, 2019*
10. Anheuser-Busch Washington’s Birthday Parade (*Abrazo attire – NO SASH*)  
*Saturday, February 23, 2019*
11. **ANY other appearances** as official “WBCA/IGNC Abrazo Children” in Laredo, or any other city, either in person or in print (i.e. magazine ads, articles, commercials, etc.) are at the request and/or **approval** of the WBCA. This also applies to any appearances at local schools, sporting functions, and local and out-of-town parades, such as the Fiesta Flambeau Parade in San Antonio, for example.

### THE FOLLOWING IS A LIST OF EXPENSES PARENTS OF ABRAZO CHILDREN WILL BE RESPONSIBLE FOR:

1. Abrazo attire.  
(Upon selection, parents must meet with designated committee to discuss and approve Abrazo Costumes.)
2. Travel expenses i.e. transportation, hotel, and meal expenses.  
(Expenses associated with out-of-town parades, Austin Trip and/or DC Trip)
3. **Parade Float: The parade float is decorated every three years at the expense of the WBCA. Any additional modifications by the parents will be at their own expense.** Changes must be approved by the WBCA prior to making any modifications.

Parent’s Signature: \_\_\_\_\_

**WBCA Office Copy**  
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