

Fall 2021

Houston Omega Lamplighters

Due October 9th

Send Completed Packet to:

HoustonLampLighters@gmail.com



OMEGA
LAMP LIGHTERS



OMEGA PSI PHI FRATERNITY, INC
OMEGA LAMPLIGHTERS
Houston, Tx.



September 2021

Dear Parents and Prospective Candidates:

Congratulations! You have been highly recommended to become involved in Houston's elite minority male organization.

The Omega Lamplighters of Houston is now accepting applications for membership for the 2021-2022 school years. Omega Lamplighters is an organization dedicated to helping **Houston Area** young men of high school age to grow and develop their leadership talents in every phase of life. The organization models the fraternity whereas active leaders and achievers in the community are sought out. Former members of Omega Lamplighters included standout athletes, school government leaders, scholars, etc. The common bond between young men in the program mirrors the aim of the fraternity; to produce the greatest thinking minority males in Houston. **Please be advised that Omega Lamplighters is an entity sponsored by Omega Psi Phi Fraternity, Inc., however its participants are not considered or affiliated as members of the fraternity!!**

Through club-oriented activities, Omega Lamplighters perform projects that will expose young men to planning, execution, reporting ideas, and simulating good leadership characteristics designed to raise their aspiration levels. All activities and programs are modeled around the following four phases:

- Leadership
- Academics
- Maturity
- Perseverance

Several benefits that come from your affiliation with the Omega Lamplighters include:

- Numerous hours of community service (essential for college consideration).
- College Grants and Scholarship (merit and need based). Senior participants are also eligible for up to **\$4000 in scholarships** through the fraternity and its affiliates.
- Mentorship and partnership with the esteemed Omega Psi Phi Fraternity, Inc.
- ACT/SAT/College Application waivers and tutoring opportunity.
- Local and National networking opportunities.

Should you have any questions regarding the program, please feel free to contact: **Omega Lamplighters Committee – HoustonLampLighters@gmail.com**

Tavares Ferguson
Tavaresferguson@gmail.com
Program Director

Fred Maxie
fmaxie@hotmail.com
Assistant Director

Marcus Griffith
Mdgriffit2011@gmail.com
Program Secretary

Bobby Brown
socialactionchair@gmail.com
Community Service Chair

\$75 ANNUAL MEMBERSHIP FEE TO BE COLLECTED AFTER ADMISSION

HOUSTON OMEGA LAMPLIGHTERS

Please complete all information requested. Print (black ink) or Type.

Name: _____ Date _____

Home Address _____
Street City State Zip Code

Home Phone: _____ Birthday _____ Age _____

Current School _____ Grade: _____

Grade Point Average (un-weighted): _____

Referred By: _____

Is the referral by a member of Omega Psi Phi Fraternity? Yes / No
(Circle one)

Parents / Guardian: _____

Emergency Contact: _____ Emergency Phone #: _____

Church Affiliation: _____

Medical Disability: _____



Organizations that you have participated in:

- 1.
- 2.
- 3.
- 4.
- 5.

Parents Signature: _____ Your Signature: _____

Health Information Form 1C

Participant's Name:
Doctor's Name

Birth Date:

Health Insurance: _____ Policy or Plan # _____

Participant's Medical # (if applicable) _____

Name of emergency contact: _____ Relationship _____

Does this participant have any physical or emotional conditions of which the Lamplighter advisors should be aware?

Restrictions on activities: _____

Regularly prescribed medications: _____

Date of most recent tetanus booster? _____

Allergies to drugs? _____

Allergies to food or special diet? _____

Allergies, other? _____

Parent's Authorization:

This health history is correct as far as I know. The person herein described has my permission to engage in all prescribed activities except as noted above. The following authorization empowers the staff of Omega Lamplighters Youth Group to take whatever steps they deem necessary to insure the well-being of your child should a medical emergency occur during a youth group meeting/activity.

Every attempt will be made to contact the parent or emergency contact provided.

I, _____ do hereby authorize the staff of Omega Lamplighters Youth Group to take necessary emergency measures in

The treatment of my child _____ if needed. My son is in good physical health and does not have any disabilities which may be aggravated except as noted on this form. I release Omega Psi Phi and its members from all responsibilities other than supervised, scheduled activities. In the event that I cannot be reached in an emergency, I hereby the authorize the physician selected by Omega Psi Phi to hospitalize, secure proper treatment for, and order injections, anesthesia and surgery for my child named above.

Signature of Parent / Guardian Date

Code of Conduct Form 1D:

Events of Houston Lamp Lighters Club School Year 2021-2022

1. Possession and use of any drug, marijuana, tobacco, or alcohol is strictly forbidden. Violations will result in immediate dismissal from the event and will be expelled from the program.
2. Attendance at all aspects of an event is mandatory. Three absences from mandatory meeting will result in expulsion from the program.
3. No participation in any event or failure to attend any part of an event without the expressed consent of their parent and the acknowledgement of the advisor may result in expulsion from the program. No participant may leave the grounds of any sanctioned Omega Lamplighters event without the expressed permission of the advisor.
4. Any rules announced by the advisor/leadership of the event are to be observed as if they were written rules.
5. All local, state and federal laws shall be in force.
6. No foul language or disruptive behavior (as determined by the advisor) will be tolerated.
7. At all times during an event, participants are expected to show respect and courtesy to advisors, chaperons and all other Omega Lamplighter Youth Group participants.

The participant's parents will be notified immediately if any of the rules are broken. Anyone who does not follow these rules will not be allowed to participate in future events and risks dismissal from the Omega Lamplighters Youth Group. Any member who is dismissed from the program will forfeit all Omega Lamplighter paraphernalia and money paid to the program.

I understand the above outlined Code of Conduct: Events of Omega Lamp Lighter Club and agree to follow such Code.

Signature of Youth Group Participant

Date

Signature of Parent / Guardian

Date



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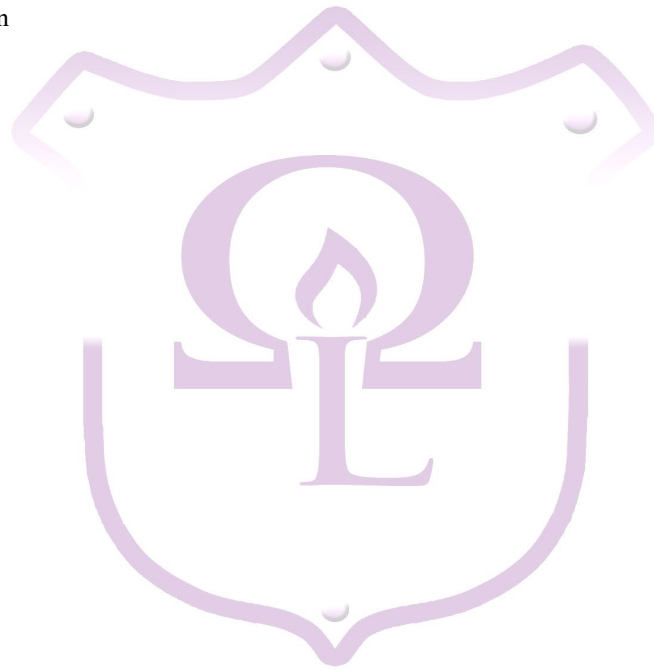
MASTER PERMISSION SLIP Form 1E

This permission slip is to cover all field trips that your child will attend this year. Parents will be notified in advance of the dates and destinations of all trips.

_____ has permission to go on all Omega Lamplighters Youth Group trips for the 2021-2022 school year.

Participant's Name

Signature of Parent / Guardian



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Letter of Intent/Letters of Recommendations

Letter of Intent

Please answer the following questions in your letter of intent (letter must not exceed 250 words):

1. What are your life goals (Career, Academic, and Personal)? What weaknesses do you think could keep you from being successful? What strengths will help you reach these goals? What do you hope to get out of this experience?
2. What gifts, talents, motivations, and interests do you bring that would enhance the experience for the group.

Letters of Recommendation

One of the letters of recommendation must come from either a financial member of Omega Psi Phi or a school faculty member. The second can come from a coach, pastor, mentor etc.

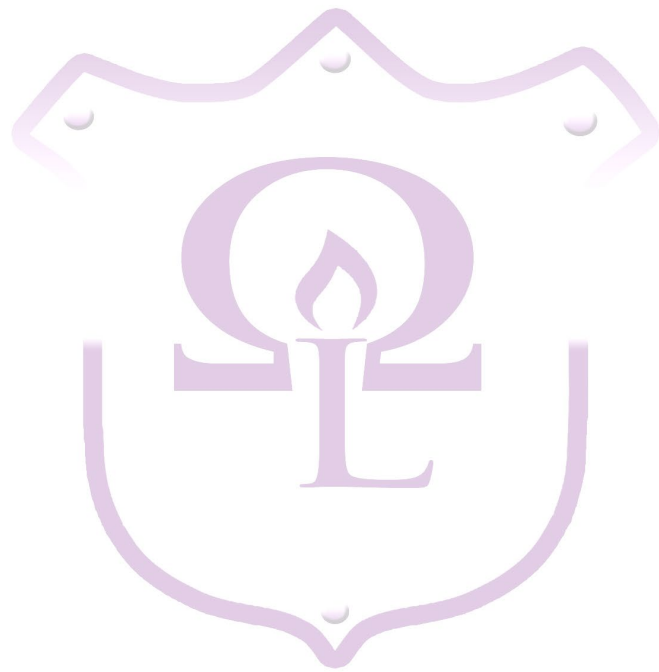
To the person recommending the applicant

Please have the following questions answered in your letter of recommendation (Must not exceed 250 words):

1. Why would it be good for this applicant to participate in the Omega Lamplighters Club?
2. What character attributes have you experienced from the applicant that would make him a valuable person to have in our program? Please illustrate how you have observed these attributes.



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