

# YOUTH COUNCIL

## Members can expect to learn:

- Leadership skills
- Special event planning
- Public speaking
- How to work as a team
- About local politics
- How to chair meetings
- How to deliver seminars, workshops and presentations
- Conflict resolution, mediation, negotiation, communication skills, etc.

## Benefits:

- Being a community leader
- Meetings with Mayor & City Councilors
- Gain employment skills
- Have your voice heard
- Meet youth with similar Interests
- Be a youth representative from your school
- Gain references for scholarships and employment
- Volunteer hours



Make a difference in our community.  
Being a Youth Council member requires a commitment to attend all meetings and a weekend retreat.

Meetings are held twice a month from:  
September to June.

Cost \$100 for the school year and includes retreat  
\*Financial assistance may be available\*

If you are interested and would like to apply to become a member, fill out the application on the reverse side and send it to:

Abbotsford Youth Commission  
P208—33355 Bevan Avenue  
Sweeney Neighbourhood Centre  
V2S 0E7

Phone: 778-880-8559  
E-Mail: [Christy@abbyyouth.com](mailto:Christy@abbyyouth.com)

Check out all the programs we offer at:

[www.abbyyouth.com](http://www.abbyyouth.com)

# AYC YOUTH COUNCIL

For Youth in Grade 10 - 12

Do you have ideas for positive change in our community?

Do you aspire to be a leader?

Join the AYC Youth Council to have a say, get involved and make a difference.

Application Deadline June 15, 2018





## Youth Council Application

Name: \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Gender: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School: \_\_\_\_\_

Grade this September: \_\_\_\_\_

What leadership experience do you  
currently have?

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Why would you like to join Youth Council?

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What does leadership mean to you?

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What are two of your strengths?

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

What are two of your weaknesses?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Photo Release

As the parent / legal guardian of

\_\_\_\_\_,

I hereby give permission to the  
Abbotsford Youth Commission to use  
my child's/ward's name, photographic  
likeness and or voice recording in all  
forms and media for advertising and  
any other lawful purpose and transfer  
to the Abbotsford Youth Commission  
any and all rights, including copyright,  
which I may have to this material.

I give permission as set out above.

Parent / Guardian Name (print):

\_\_\_\_\_

Parent / Guardian Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_