



Seminole Youth Council Application

Full Name: _____ Birthdate: ____ / ____ / ____

Phone Number: (____) _____ Email: _____

Address: _____ City _____ State _____ Zip Code: _____

T-Shirt Size: _____ Grade: _____ School Name: _____

Guardian(s) _____ Contact Number: (____) _____

Guardian(s) _____ Contact Number: (____) _____

Why do you want to serve as a member of the Youth Council?

What are the three most important issues to you, your friends, and your family concerning your neighborhood?

1. _____

2. _____

3. _____

What personal skills and characteristics do you possess that would make you a good representative?



If you could bring one thing to this city or change one thing, what would it be?

Please list special interests, volunteerism, work experience, school activities and/or skills.

PLEASE READ CAREFULLY.

Youth Council member must adhere to the following:

- Must apply by August 30th
- Must be a junior or senior in high school maintaining a 2.5 GPA or better
- Must be willing to attend and participate in scheduled meetings with no more than 2 absences
- Must have reliable transportation
- Must participate in one community project

To apply, applicants must send the following to city hall:

- Completed Application
- Liability Release Form

Completed applications may be emailed to Info@Seminole-Oklahoma.net. If there are any questions or concerns regarding Youth Council, please contact Madison Streater at 405-382-4330 ext 112 or Mstreater@Seminole-Oklahoma.net . Visit Seminole-Oklahoma.net/youth-council for more information.

The first meeting is Wednesday September 4th.



This Release is executed by _____ (parent/guardian) for
_____ (child/dependent) to the City of Seminole ("City") on this day of
_____, _____.

I, the undersigned, request that the City permit the above-named student to participate in Youth Council activities sponsored by the City during the Fall/Spring term. I understand that the City is under no obligation to permit the student to participate in Youth Council and that the City receives no financial compensation for the student's participation. I further understand that Youth Council will include a wide variety of activities designed to develop leadership skills and knowledge relating to local government and various community and societal issues, including controversial issues. I understand that such activities will include, but not be limited to physical and educational activities with various modes of travel to and from the sites where such activities are conducted. I confirm that I have advised the City of any physical limitations applicable to the student that may restrict participation in physical activities.

In consideration for the city acceptance of the above-named student's participation in Youth Council, I release, acquit and forever discharge and covenant not to sue the City of Seminole and the Youth Council, their affiliates and sponsors, and the facilities used in connection with Youth Council, including but not limited to the City of Seminole and all organizations and agencies providing specific demonstrations, lectures and discussions, meeting places, information and other services utilized by Youth Council, all of their respective directors, officers, employees, agents, staff, and volunteers, and elected appointed officials of the City of Seminole (collectively and individuals, the "releasees"), of and from any and all claims, suits, judgments, liabilities, causes of action, demands, damages, costs, expenses whatsoever, in law, equity or otherwise (collectively and individuals, the "claims"), flo or arise out of or in connection with the students participation in Youth Council including without limitation, any injury the student sustains as a result thereof, and the negligence and acts of third parties.

I, the undersigned parent/guardian of the above listed minor, hereby give my consent to have a doctor of medicine or dentistry or associated personnel provide the student with medical assistance and/or treatment and agree to be financially responsible for the cost of such assistance and/or treatment should any instances requiring emergency medical treatment arise. Below on this form I have listed any allergies or medications the student may have and/or use.

I authorize Youth Council staff and volunteers to photograph the student in any and all Youth Council activities. I grant to the City and its assigns the right, title and interest thereto and therein, and the right to control, produce, reproduce, use, edit and copyright and dispose of the same without limitation as to frequency, duration, place, media form, use or purpose, including without limitation, for the purposes of education, promotion and publicity.



I acknowledge that neither the City or Youth Council nor any person/entity acting on behalf of or in conjunction with their entities has made any representation, guarantee, warranty or assurance regarding Youth Council, its activities, or the staff and volunteers.

The invalidity or unenforceability of any particular provision of this form shall not affect the other provisions hereof, and this form shall be construed in all respects as if such invalid or unenforceable provisions are omitted.

The undersigned has fully read and understands the above and has had all questions answered to his/her satisfaction.

By signing below, I acknowledge that I have read and understand the Release.

IF THE STUDENT IS NOT 18 YEARS OF AGE OR OLDER, THIS RELEASE MUST ALSO BE SIGNED BY THE STUDENT'S PARENT(S) OR LEGAL GUARDIAN.

Date

Parent(s)/Legal Guardian

Date

Student

Emergency Contact (Name/Number): _____

Allergies: _____

Medications: _____



Important Dates

Most meetings are at noon on the first Wednesday of each month. Lunch will be provided. Schedule is subject to change.

August 30th – Deadline for Applications

September 4th – Meet & Greet @ Reynold's Wellness Center

September – Oklahoma Municipal League Conference

October 2nd – Officer Elections at 12 pm @ RWC

November 6th– Speaker TBA @ Fire Department

December 4th – Speaker TBA at 12pm @RWC

January 8th – Speaker TBA at 12pm @ RWC

February 5th– Speaker TBA at 12pm @ RWC

March 5th – Speaker TBA @ 12 pm @ RWC

April 5th – Prepare Presentation to City Council at 12pm @ RWC

April - Seminole Community Clean Up

May 7th –Speaker TBA 12pm @ RWC

May – Final Meeting