

# Club Phoenix Teen Council Application

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

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

\_\_\_\_\_

Home Phone #: \_\_\_\_\_ Grade/School: \_\_\_\_\_

Parents E-mail Address: \_\_\_\_\_

Please describe why you would like to serve your youth community as a Teen Council Member, as well as share any ideas for future projects:

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\_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**\*\*Three References\*\***

1. Name:

Phone Number:

How you know them:

2. Name:

Phone Number:

How you know them:

3. Name:

Phone Number:

How you know them: