

## FOUNDATION YMCA JUNIOR BOARD APPLICATION

Legal Name	/Birthday///
Home Address	
CityState _	Zip
Cell Phone H	Home Phone
EmailParent Em	nail
High School/Graduating Class Year	_ Are you a Y Member?
Do you participate in any Y activities?	
Areas of interest	
How did you hear about the Junior Board?	
Parent Signature	<del>-</del>
Please include a paragraph about a meaningful volunte	eer experience with this application.

The Foundation YMCA Junior Board Meets every other month on Sundays at 4pm.