



SOUNDVIEW FAMILY YMCA

YOUTH BOARD MEMBER APPLICATION

Application information

Full name:

Last

First

M.I.

Date:

Address:

Street address

Apt/Unit #

Phone:

City

State

Zip Code

Email:

Are you a Y Member?

Which school do you attend?

Will you be a sophomore or a junior in the fall of 2025?

Yes No

Can you commit to a 2-year term starting in September? For juniors a 1-year term.

Yes No

Are you able to attend 4 board meetings a year and other meetings as scheduled?

Yes No

Please share a little bit about why you're interested in this position.

School Recommendation

Please have a teacher or guidance counselor recommend you for this position by having them sign below.

Full name:

Position
