



St. John the Baptist
Youth Board Application
2020-2021



Name: _____

Address: _____

City/State/Zip Code: _____

Parent Phone #: _____

Your Email: _____

School Attending: _____

Grade in 2020-2021: _____

How did you hear about Youth Board? _____

Why do you want to be a member of the Youth Board? _____

What ministries events have you attended or volunteered for? _____

What gifts and talents do you bring as a person to the Youth Board? _____

Youth Board meets every other Tuesday from 7pm to 8pm during the school year. Do you have a conflict with the meeting time?

Yes No

If yes, please explain: _____

Please read the following:

I have read the expectation and responsibilities of Youth Board. I understand these and will fulfill these to the best of my ability. I also understand, that if I am unable to do so, I may be asked to meet and discuss this with the Youth Minister and may be asked to step down depending on the situation.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____