



Welcome to the Mayor's Youth Action Team

The Township of King's Mayor's Youth Action Team (MYAT) formed in 2015 is a voluntary group of young individuals between the ages of 13 and 18 whose goal is to support and recognize their fellow youth and ensure that young voices are heard throughout the Township of King.

The Main objectives of the Mayor's Youth Action Team are:

- To act as an advisory body to the Mayor and Council on matters which have an impact on youth in King.
- To identify and bring forward issues which will have an impact on King youth.
- To foster a positive image of youth in our community by participating actively in community events and activities in King.
- To promote positive meaningful activities for youth in partnership with the community.
- To act as an advocate for youth issues.
- To encourage youth to become more familiar with the workings of local government through education, involvement and participation.

**Please fill out the following application form and return it to
Magda Campeau at mcampeau@king.ca or
tel: 905-833-5321 ext. 5237**



MYAT APPLICATION

Name: _____ Date: _____
(MM/DD/YY)

Address: _____ Unit No: _____

City: _____ Postal Code: _____

Home Tel: _____ Cell: _____

Email: _____

Age: Youth (please specify age) _____ Over 18

Preferred method of Contact (check all that apply): Home Tel Cell Email

1. Why do you want to be a part of the Mayor's Youth Action Team (MYAT)?

2. How do you feel your previous volunteer/ work experiences will contribute to your role with MYAT?
(Please list previous volunteer/work positions)

3. What do you expect and/or hope you will gain from your experience with MYAT?

4. How did you hear about MYAT?

Emergency Contact Information

Please provide the names and phone numbers of individuals who can be reached in case of an emergency while you are volunteering with us.

Name	Relationship to you	Tel No. 1	Tel No. 2
1. _____	_____	_____	_____
2. _____	_____	_____	_____



MYAT APPLICATION

I, the undersigned, authorize investigation of statement herein.

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge.

All statements become part of my personal file.

Signed: _____ Date: _____

**Personal information on this form is collected under the authority of the Municipal Act, and will be used to determine suitability of the applicant for volunteer work. Information is kept confidential and viewed only by the Volunteer Coordinator and their direct supervisor for the purposes of contact and health and safety.