

Keep Sugar Land Beautiful Youth Advisory Board Waiver Application: 2025-2026

The success of this board depends on each member working together.

"The greatest threat to our planet is the belief that someone else will save it." - Robert Swan

- Please complete this application, sign, and return to: vickigist@kslb.org by May 12, 2025.
- Applicants must:
 - o be high school sophomores or juniors for 2025-2026 school year.
 - o have an environmental passion or want to learn more about our environment
 - o have the desire to benefit our community
 - o be willing to devote the time needed for this board commitment.
 - o live or attend school in Sugar Land
- KSLB YAB members *must attend monthly ZOOM meetings and volunteer at 3 KSLB events*
- Interview will be conducted after this application is received and reviewed. Term is one year.
- Please type application. Applicant and Parent Signatures are required. Thank you for your interest!

Name:			
Address:		City:	Zip Code:
E-Mail:		Cell Phone:	Home Phone:
2025-2026 Grade:	Age:	Date of Birth:	T-Shirt Size:
School:		School Organizat	ion:
Sponsor Teacher:	Teacher's Email:		Teacher's Phone:
Emergency Contact:			Cell Phone:
Relationship of Emerger	ncy Contact to S	Student:	
employees, age nature that may Advisory Board, I consent to and KSLB YAB mem name and photo I certify that I am guardian has full KSLB projects, My parent/guard	Il indemnify and ents, and assign be incurred by or any project of authorize the unber and/or volugraph in all form eighteen (18 Il knowledge ar events, and volugian has given r	I hold harmless Keep Sugarus: from any and all liability or me) as a result of my volunt or event, as a Keep Sugar Lause and reproduction of any aunteer. I give Keep Sugar Lauss and media without compens of age or older; and and consent of my participatio lunteer opportunities.	and all photographs or video as a nd Beautiful the right to use my ensation to me. /or that my parent or court-appointed n in the KSLB Youth Advisory Board, as evidenced by his/her signature below.
Volunteer Participant Sig	nature (If not 18 o	or older, parent/guardian must co-si	gn below) Date

Date

Parent/Guardian Signature (Undersigned has read the above and understands this waiver)

2025-2026 KSLB YAB Application - Page 2 Name of Applicant
Please list three strengths that you will bring to the Keep Sugar Land Beautiful Youth Advisory Board:
1
2
3
KSLB YAB will need to develop a project to further the KSLB mission. What are your project ideas?
Meetings are mandatory. I will attend each monthly KSLB YAB meeting: Applicant Signature
List <u>all</u> 2025-2026 extracurricular activities (mentorships, school, community, church, work, etc.) in which you will participate:
Have you volunteered for KSLB? Which Events? When?
Please list your leadership positions, volunteer activities, awards or achievements and applicable dates:
Please list all skills you will bring to the board: (photography, media, writing, public speaking, art, theater, etc.)
Please list your hobbies:
Why would you like to serve as a YAB member? What would you like to gain from your service? Why would you be a great YAB member?