



Youth Advisory Committee Release Form

(to be completed by parent or guardian)

Dear Parent/Guardian:

On behalf of Four County Community Foundation, I would like to welcome your son or daughter as an applicant to our Youth Advisory Committee. Our Youth Advisory Committee (YAC) demonstrates philanthropy and leadership in our local community through grantmaking from our Kellogg Youth Fund, service projects, and other activities. We look forward to working with all of our YAC members this year - THEY WILL BE MAKING A DIFFERENCE!!

YAC members are required to attend meetings and service projects in many locations. Please review, sign, and include this release form with the YAC application page. If you have any questions, comments, concerns, or ideas, please contact me at kdickens@4ccf.org or at (810)444-8852.

Sincerely,

Kathy Dickens
Executive Director

My student, _____ (print child's name), has my permission to attend meetings and special events of Four County Community Foundation's Youth Advisory Committee. I understand that these meetings and events may take place at various times and locations during school hours, before or after school hours, or on the weekends. I agree that I will not hold Four County Community Foundation, its adult advisors, or its sponsors responsible for any injury or accident that my son/daughter may incur during or in transit to and from Youth Advisory Committee activities. I also give permission for my son/daughter's picture to be used in newspapers, social media and 4CCF website.

_____	Parent/Guardian Signature
_____	Parent/Guardian Name (please print)
_____	Parent/Guardian Phone Number (cell)
_____	Parent/Guardian Phone Number (secondary number)
_____	Parent/Guardian Email Address