

**Telephone**: (08) 9394 5000 **Facsimile**: (08) 9394 5184 **Website**: www.armadale.wa.gov.au

Email: info@armadale.wa.gov.au

Address: 7 Orchard Avenue, Armadale, Western Australia 6112

## **Armadale Youth Advisory Council**

## Application Form 2020/2021

The Armadale Youth Advisory Council (AYAC) is made up of young people aged 12-25 years with a passion for making Armadale a great place for young people to live. The AYAC meet on the first Monday of the month 4.00pm - 5.30pm.

Young people interested in applying to be part of the Armadale Youth Advisory Council should complete this form. Applications are due by Monday 21 September 2020 via email at info@armadale.wa.gov.au or in person at the City of Armadale Administration Building. Membership is currently open for 1 year or until 26 years of age. Your information will be kept confidential.

## **Your Details**

Tour Details										
Name:				Preferred Name:		:				
Age:				Date of Birth:						
Gender:										
What are yo	our prefer	☐ She/Her/He	rs				☐ They/Them/Theirs			
Do you ide	ntify as:	<ul> <li>☐ Aboriginal or Torres Strait Islander</li> <li>☐ Culturally and Linguistically Diverse</li> <li>☐ A person with a disability</li> <li>☐ None of the above</li> </ul>								
Address:	SS:				S	uburb:				
Email:				Phone:						
Do you have any medical concerns, access requirements or food allergies/dietary requirements?										
Emergency C	ontact De	etails								
Emergency Contact Name:										
Relationshi	p:				P	hone:				



**Telephone**: (08) 9394 5000 **Facsimile**: (08) 9394 5184

**Website**: www.armadale.wa.gov.au **Email**: info@armadale.wa.gov.au

Address: 7 Orchard Avenue, Armadale, Western Australia 6112



## **Your Application**

Tell us a bit about yourself. What interests or passions do you have?						
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					
What community involven	nent or volunteering have you done?					



**Telephone**: (08) 9394 5000 **Facsimile**: (08) 9394 5184

**Website**: www.armadale.wa.gov.au **Email**: info@armadale.wa.gov.au

Address: 7 Orchard Avenue, Armadale, Western Australia 6112



Why are you interested in being part of the Armadale Youth Advisory Council?						
Referee		t dataile of one referee				
Please give the	e name and contact	t details of one referee.				
Name:			Phone:			
Relationsh	ip to applicant:					
Parent/Guard	dian Permission	(required if under 18)				
l,		give permission	for	to attend the		
		d events and projects, and other motional purposes.	er community ev	vents. I agree to allow the City of Armadale to		
Signed (Gu	ıardian):					
Signed (Ap	plicant):					