

Youth Council of Fort Lee

Membership Application

YouthCouncilFortLee.org

Please Print Clearly

MEMBER NAME(S): _____

HOME ADDRESS: _____

HIGH SCHOOL: _____

MEMBER E-MAIL: _____

MEMBER PHONE #: _____

PARENT NAME(S): _____

PARENT E-MAIL: _____

PARENT PHONE #: _____

Check appropriate category:

Annual Membership Due: \$50.00 Cash _____ Check _____

YCFL is a registered 501(c)(3) organization of Bergen County Students dedicated to advancing the civic and cultural welfare in surrounding communities.

Membership dues support the YCFL's expenses and entitle you to participate in the various YCFL activities - Thank you for joining us!

MEMBER SIGN: _____ PARENT SIGN: _____

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Supplemental Application:

1. Why do you want to join YCFL and what do you want to get out of it?

2. What do you think that you can bring to the YCFL in particular?