**Sevier County Fair Youth Board Application**

We are accepting applications for the 2025 Sevier County Fair Youth Board. If you are currently in 9th – 12th grade, love the fair, this would be the opportunity for you. While participating in this youth board you can help plan and coordinate special events before and during the fair. You can earn volunteer hours, develop your leadership and communication skills, and qualify for a scholarship awarded each year to a graduating senior who has served on the Youth Board and met all the requirements. If you can fulfill the obligations and are interested, please return the completed application by April 30th ,2025. Fair dates for 2025 are August 26th – September 1st. **NEW FOR 2025 A $10 MEMBER FEE IS REQUIRED. (COLLECTED AT FIRST MEETING) OR ATTACH CHECK OR MONEY ORDER**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_**

**Current Grade: \_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_**

**Student’s cellphone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Does Student text? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student School Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**T-shirt size for student (circle one): XS S M L XL XXL XXXL**

**Parent/Guardians name, email address, and phone numbers:**

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**Means of Transportation:**

**Drive Yourself Parents Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you interested in serving as an officer? Yes No**

**What office are you possibly interested in? President Vice President**

**Treasurer Secretary**

**Are you able to fulfill the obligation of meeting once a month? Yes No**

**Are you able to fulfill the obligation volunteering the months leading up to fair, pre-fair, fair, and post fair? Yes No**

**Are you able to fulfill the obligation of volunteering a minimum # of hours: April 1st – August 14th, 2025 - *15* hrs.**

**August 15th – August 25th, 2025 - *15* hrs.**

**August 26th – September 1st, 2025, -*15* hrs**

**September 2nd – September 6th, 2025 - *10* hrs.**

***Mandatory attendance for Volunteer Appreciation Party – Must attend to receive any prizes, acknowledgements, certificates, or anything else associated with volunteering. Date TBD***

**Have you previously served on our youth board? Yes \_\_\_ No \_\_\_**

**Do you have experience working with the public? Yes\_\_\_ No \_\_\_**

**If yes, please give example(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**What other clubs, youth groups or organizations do you belong to:**

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**Why do you want to be a member of the Sevier County Fair Youth Board?**

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***Please return this completed form by April 30th , 2025.***

**Remit by any of the following means:**

* **Hand in to your school counselor**
* **Mail to the Sevier County Fair, P.O. Box 6514, Sevierville, TN 37864**
* **Emailing Youth Board Director: Amanda Arwood**

***scfyouthboard@gmail.com***

* **Hand deliver to the fair office: 754 Old Knoxville Hwy, Sevierville**

**Youth Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**