



POTTAWATTAMIE YOUTH COUNCIL MEMBER JOB DESCRIPTION & AGREEMENT

Goals:

- To learn and educate others about philanthropy—the giving and sharing of time, talent, and/or treasure intended for the common good.
- To review and make recommendations regarding the distribution of Community Networking Grant Funds within Pottawattamie County, Iowa.
- To have fun, meet other leaders, and give my best.

Duties & Responsibilities:

- Attend PYC Opening Orientation & Kickoff on Sunday, September 17, 2017-- If unable to attend, contact Jessica Rayment to write a brief letter of appeal and complete alternative activity indicating the reason for my absence.
- Attend a minimum of 6 monthly PYC meetings per school year (September through May). If unable to attend or going to be late, contact an advisor as to the reason for the absence within two days of the meeting date.
- Participate and be on time for a minimum of 2 PYC sponsored community service activities within the school year.
- Ensure the integrity of the grants process.
- Evaluate all funding requests in a fair and equitable manner.
- Represent the Pottawattamie Youth Council, Promise Partners, and community partners in a mature and responsible manner at all PYC functions.
- Follow through with responsibilities and activities that I volunteer for.
- Actively participate and remain respectful at meetings and PYC sponsored events.
- Respect rules and norms as outlined by myself and my peers of the council.

Consequences:

- Removal of PYC Membership and right to participate.
- Upon determination that a violation, crime, or damage to property has been committed, the participant will be sent home at his/her own expense and fees for damage may be sought.

I have read and understand these rules, will adhere to them and realize that a violation of these rules may result in losing my membership in the council.

Signature of Youth _____ Date _____

Signature of Parent/Guardian _____ Date _____

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Giving our time, talents and
treasures to ensure the success of
our community

**POTTAWATTAMIE YOUTH COUNCIL (PYC)
PARENTAL/GUARDIAN CONSENT FORM**

The following must be signed by a parent or guardian:

I give permission for my child _____ to be a member of the Pottawattamie Youth Council sponsored by Promise Partners, Pottawattamie County's Alliance for Youth.

I hereby release Promise Partners from any liability resulting from events beyond its control. In the event of an accident or illness, Promise Partners or its agents are authorized to provide medical care as deemed necessary for the welfare of my child. Promise Partners will make every effort to contact parents/guardians immediately if necessary. I have read and agree to the regulations outlined in the Student Agreement.

I also give permission to Promise Partners to use any and all photographs and/or videos/ audios of my child obtained while participating in the council. These opportunities arise from time to time to provide positive information and publicity for programs.

Parent/ Guardian Name (Please Print) _____

Parent/ Guardian Signature _____

In Case of Emergency Contact _____ Date _____

Medical Information:

Insurance Company _____ Policy # _____

Signature of policyholder _____

Does your son/daughter have any medical conditions we should know about? (Allergies, recent illness, dietary needs, physical limitations, etc.) If so, please explain:

T-Shirt Size:

____ Small ____ Medium ____ Large ____ X-Large ____ 2X-Large ____ Other