



**City of High Springs
Mayor's Youth Council**

Membership Application

NAME _____
First MI Last

ADDRESS _____
(Must be a resident of the City of High Springs)

CITY _____, FL ZIP _____

EMAIL: _____

TELEPHONE: HOME _____ WORK _____

CELL _____

GRADE LEVEL 7 ___ 8 ___ 9 ___ 10 ___ 11 ___ 12 ___

SCHOOL _____

PLACE OF EMPLOYMENT _____

How long have you been a resident of High Springs? _____

Membership in organizations, service clubs, churches, volunteer organizations or community service _____

What contributions do you feel you could make if you were selected to this Board? _____

Why are you interested in being appointed to this board? _____

Some of the boards and committees appointed by the City Commission are required to comply with Chapter 112, Florida Statutes, the Financial Disclosure Law. According to the State of Florida, Commission on Ethics, person appointed to this board/committee will need to fill out a Financial Disclosure Statement. Would you be willing to file the required financial statement? Yes _____ No _____. If you have any questions about this law, please call City Hall at (386) 454-1416, Option 6.