



APPLICATION TO BE A YOUTH SPONSOR



Name	First _____ Last _____	Age	
Grade	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	E-Mail Address	
Street Address	House/Apartment Number _____ Street _____ City _____	State _____	Zip Code _____
Mailing Address	House/Apartment Number _____ Street _____ City _____	State _____	Zip Code _____

THE GARRISON YOUTH SPONSORSHIP COORDINATOR MUST HAVE ALL THREE OF THESE SIGNATURES IN ORDER TO PROCESS THIS APPLICATION.

"I endorse this **Youth Sponsor Applicant** as an individual of solid character who would serve as a good ambassador for this community and as a suitable, responsible and trustworthy **Youth Sponsor**."

Parent or Guardian's Name & Signature	Name (Clearly Printed or Typed) _____	Signature _____
School Counselor's Name & Signature	Name (Clearly Printed or Typed) _____	Signature _____
Adult Community Member's Name & Signature	Name (Clearly Printed or Typed) _____	Signature _____

Applicant's Hobbies & Interests <small>(To be filled out by applicant)</small>			
Sports	Music	Clubs/Programs	Other Hobbies & Interests
<input type="checkbox"/> Baseball	<input type="checkbox"/> Alternative Rock	4-H Club name: _____	<input type="checkbox"/> Animals
<input type="checkbox"/> Basketball	<input type="checkbox"/> Emo		<input type="checkbox"/> Cars
<input type="checkbox"/> Bowling	<input type="checkbox"/> Choir	<input type="checkbox"/> Army Teen Panel	<input type="checkbox"/> Computers
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Classic Rock	<input type="checkbox"/> Boy Scouts	<input type="checkbox"/> Cooking
<input type="checkbox"/> Football	<input type="checkbox"/> Composing Music	<input type="checkbox"/> Career Launch	<input type="checkbox"/> Dancing
<input type="checkbox"/> Frisbee	<input type="checkbox"/> Country	<input type="checkbox"/> Chapel Youth Group	<input type="checkbox"/> DJ-ing
<input type="checkbox"/> Golf	<input type="checkbox"/> Electronica	<input type="checkbox"/> Dragonfly Quest	<input type="checkbox"/> Drama
<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Gospel	<input type="checkbox"/> Environmental	<input type="checkbox"/> Filmmaking
<input type="checkbox"/> Hiking	<input type="checkbox"/> Goth	<input type="checkbox"/> FBLA	<input type="checkbox"/> Fitness
<input type="checkbox"/> Hockey	<input type="checkbox"/> Metal	<input type="checkbox"/> Geotracking	<input type="checkbox"/> Movies
<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Hip Hop/Rap	<input type="checkbox"/> Goals for Graduation	<input type="checkbox"/> The Outdoors
<input type="checkbox"/> Judo	<input type="checkbox"/> Indie Rock	<input type="checkbox"/> Girl Scouts	<input type="checkbox"/> Painting
<input type="checkbox"/> Karate	<input type="checkbox"/> Industrial	<input type="checkbox"/> JROTC	<input type="checkbox"/> Photography
<input type="checkbox"/> Kung Fu	<input type="checkbox"/> Pop/Top 40	<input type="checkbox"/> Junior Honor Society	<input type="checkbox"/> Reading
<input type="checkbox"/> Running	<input type="checkbox"/> Punk	<input type="checkbox"/> Keystone Club	<input type="checkbox"/> Science
<input type="checkbox"/> Soccer	<input type="checkbox"/> R&B/Soul	<input type="checkbox"/> Model UN	<input type="checkbox"/> Scrapbooking
<input type="checkbox"/> Soft Ball	<input type="checkbox"/> Reggae	<input type="checkbox"/> Passport to Manhood	<input type="checkbox"/> Sightseeing
<input type="checkbox"/> Swimming	<input type="checkbox"/> Singing/Vocals	<input type="checkbox"/> SMART Girls	<input type="checkbox"/> Skateboarding
<input type="checkbox"/> Tae Kwon Do	<input type="checkbox"/> Ska	<input type="checkbox"/> Sports Club	<input type="checkbox"/> Technology
<input type="checkbox"/> Tennis	<input type="checkbox"/> Techno/Dance	<input type="checkbox"/> Teen Tech Team	<input type="checkbox"/> Video Games
<input type="checkbox"/> Volley Ball	<input type="checkbox"/> Writing Lyrics	<input type="checkbox"/> Torch Club	<input type="checkbox"/> Weblogging
<input type="checkbox"/> Walking	Other: _____	<input type="checkbox"/> Youth Advisory Cnsl.	<input type="checkbox"/> Weights
<input type="checkbox"/> Wrestling	I play this instrument: _____	<input type="checkbox"/> Youth Ldrshp. Forum	<input type="checkbox"/> Writing
Other: _____		Other: _____	Other: _____