

Armidale Regional Youth Advisory Committee

Permission Note

Please read and sign.

If you are under 18 years of age you must get your parent / guardian to sign the approval form as well.

Please print

I _____, being the parent / guardian of _____ give permission for my son / daughter to be a member of the Armidale Regional Youth Advisory Committee (ARYAC).

I understand the ARYAC aims to:

- Provide specialist advice to Council on youth issues and youth policy
- Involve young people in the community
- Act as a consultative mechanism for Council on issues that affect a diverse range of young people
- Plan and organise cultural, environment, recreation and social activities for young people
- Lobby and advocate on issues affecting young people
- Promote positive stories and images of young people

To achieve this, I understand my son / daughter / guardian will be required to participate in weekly meetings, and additional events and activities as required.

I understand that my son / daughter / guardians name may be included in print and digital media in connection with ARYAC.

Parent / Guardian Name: _____

Parent / Guardian Signature: _____ Date: _____

Young Persons Name: _____

Young Persons Signature: _____ Date: _____