## KALGOORLIE-BOULDER YOUTH COUNCIL APPLICATION FORM



Name:	Date of Birth:					
Gender:	Male	Female	Non-binary	Other		
Address: _						
Suburb:		Post Code:				
Home Phor	ne:	Mobile:				
Email addre	ess:					
Emergency	ency Contact Name: Number:					
•	bit about yours ur spare time?	self! What are s	ome of your interes	sts and hobbies? What do you like		
Boulder? (F	or example; th , other youth gr	e Student Repr	esentative Council	ed organisations in Kalgoorlie- , sporting clubs, dance		
	-	in joining the K ou bring to the (	_	outh Council? What special		

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If under 16 years of age, please h		
Application Print Name	Applicant Signature	Date
Please sign and date the comp	leted application form:	

If you would like help filling out the application form or need more information please contact the City's Youth Development Officer on 08 9021 9600 or via email <a href="mailbag@ckb.wa.gov.au">mailbag@ckb.wa.gov.au</a>

Please submit your application form in person or via post to:

Kalgoorlie-Boulder Youth Council
577 Hannan Street
Kalgoorlie WA 6430

Or email it to <a href="mailbag@ckb.wa.gov.au">mailbag@ckb.wa.gov.au</a>