



Balonne Youth Council

Membership Application Form

Balonne Youth Council provides a great opportunity for the young people of the region to have a voice around any concerns that they have. It also presents some great opportunities to meet a wide range of interesting people from the broader community and learn a lot about youth issues, council processes and gaining leadership skills.

The purpose of the Youth Council is to:

- Strengthen engagement between Balonne Shire Council and young people
- Build young people’s knowledge of Council processes to enable them to participate in Council’s decision-making processes
- Build the Council’s knowledge of the needs of young people and how these needs may be met
- Enhance the leadership skills of youth and develop a strong positive image and profile of young people within the Balonne Shire
- Promote and encourage youth involvement in the planning and development of Council services and infrastructure (especially if they have a direct impact on young people, such as skate parks and recreational facilities)
- Ensure that the views of young people are canvassed and conveyed to Council, including providing advice on, or assistance with, formal consultations being undertaken by Council

Application Criteria:

- 12 up to and including 25 years of age
- Live within the Balonne Shire
- Have an interest in community issues and services
- Enjoy meeting new people

Your Details:	
Full Name:	
School Grade in 2024 (if applicable):	
Date of Birth:	
Residential Address:
Postal Address (if different from above):	
Home Phone:	
Mobile Phone:	
Email Address:	



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Please deliver or send your application to:

PO Box 201 / 118 Victoria Street ST GEORGE QLD 4487 or Email: cdo@balonne.qld.gov.au

Tell us a little about yourself:

What are your interests?

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What interests you in joining Youth Council?

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I, _____ (print name) apply to be a Balonne Youth Council member for the Balonne Shire. I agree to support the purpose of the Youth Council and will actively seek to attend the meetings and events when required.

I will ensure that I allow enough time to effectively balance studies / work / social / sport and the Balonne Youth Council membership responsibilities.

I give permission for my name and image to be used in the marketing and promotion of the Balonne Youth Council.

Signature: _____ **Date:** _____

PARENT/GUARDIAN CONSENT

(Required if under the age of 18 Years)

I, _____ (print name) understand that my son / daughter,

_____ is applying to be a Balonne Youth Council member for the Balonne Shire Council, and I support this application.

I agree to support _____ to attend the meetings and events (supporting with transport as necessary).

I agree to support _____ when zhe / she is organising his / her timetable to allow enough time to effectively balance studies / work / social / sport and the Balonne Youth Council membership responsibilities.

I give permission for my child's name and image to be used in marketing and promotion of the Balonne Youth Council.

Parent/Guardian Signature: _____ **Date:** _____

Your personal information is being collected for the purpose of applying to join Balonne Youth Council. Your personal information is handled in accordance with the Information Privacy Act 2014 and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given us permission or the disclosure is required by law.