

## 2020-2021 TEEN BOARD MEMBERSHIP APPLICATION INSTRUCTIONS

Through a variety of volunteer projects and special events, the VNA Meals on Wheels Teen Board's objective is to assist VNA Meals on Wheels in feeding the hungry and spreading awareness about senior hunger.

The VNA Meals on Wheels Teen Board offers 8 general meetings a year (September-April) of which you must attend at least 5. Each member is also required to participate in at least 6 service opportunities (4 route deliveries; 2 non-delivery activities) throughout the year to maintain your status as an active member. Routes can be completed over the summer or during school breaks. You will receive community service hours for delivering meals as well as participating in service events and general meetings.

Please submit the following to the address or email listed below:

- Completed application
- Signed Parental Consent Form
- A \$40 non-refundable membership fee is due by the October 11<sup>th</sup> ZOOM meeting. Please make check payable to VNA. Dues will establish the general operating budget for the Teen Board.
- Financial Aid Scholarships are available based on need. Please contact Inga Wilson at <a href="wilsoni@vnatexas.org">wilsoni@vnatexas.org</a> or Miriah Leddy at <a href="miriah.leddy@vnatexas.org">miriah.leddy@vnatexas.org</a> for more information.

Submitting an application does not guarantee membership. Applications will be reviewed based on answers submitted as well as in the interest of creating a balanced and diverse membership.

Please return all application materials by Friday, September 11, 2020.

## Mail:

VNA Meals on Wheels Attn: Teen Board 1440 W Mockingbird Lane Dallas, TX 75247-4975 Scan and email: wilsoni@vnatexas.org

You will receive an email with the status of your application on Friday, September 18, 2020. The first general meeting is tentatively scheduled for Sunday, October 11, 2020 on ZOOM.

For questions or more information, please contact Inga Wilson at <a href="wilsoni@vnatexas.org">wilsoni@vnatexas.org</a> or Miriah Leddy at miriah.leddy@vnatexas.org.

## TEEN BOARD MEMBERSHIP APPLICATION

Name:				
Street A	Address:			
City: _		State: _		Zip Code:
Cell Ph	none:	Home	Phon	e:
Email:				
School	l:		Grade	in 20/21 School Year:
Gender	r: T-Shirt Size:	Birthday:		
underst minimu	rm that all of the provided inform tand that my participation in the Vum of <b>5</b> general meetings and <b>6</b> sees) over the course of the 2020-20	VNA Meals on Vervice opportunit	Wheels ties ( <b>4</b>	Teen Board includes attending a route deliveries; 2 non-delivery
Applicant Signature:				Date:
Parent	Signature:			Date:
These a	answer each of the following que answers should be submitted with esponses.  What has made you want to join	this application	. Plea	•
2.	so many ways to get involved in	n our community	7?	
3.	Have you ever delivered meals wheels? If so, describe your ex		n anotl	ner project with VNA Meals on
4.	List two personal attributes that Board.	you will bring t	o the V	VNA Meals on Wheels Teen
5.	What extracurricular activities a upcoming school year?	and any other co	mmitn	nents do you have for the
Were y	you a member of the 2019-2020 V	NA Meals on W	/heels	Teen Board?yesno

1. If you were a member of the 2019-2020 Teen Board what feedback do you have on your experiences during the past year?

## VNA Meals on Wheels Teen Board Parental Consent Form

I hereby give consent for my child (name of youth volunteer)					
in regard to the above-named volunteer's participation with VNA Meals on Whee VNA Meals on Wheels Teen Board. I HEREBY AGREE to release and hold harm Wheels of Dallas, the VNA Meals on Wheels Teen Board and its agents, employe from any and all liability of any kind or nature whatsoever in connection with any	mless VNA Meals on ses and representatives				
expense suffered or incurred by the above-named youth volunteer as a result of an intentional or unintentional, by (I) any person who is not an agent, employee or re Meals on Wheels of Dallas and the VNA Meals on Wheels Teen Board, or (II) any	presentative of VNA				
In the event of a medical emergency and efforts to reach the parent or guardian are not successful, I also authorize the VNA Meals on Wheels of Dallas, and its adult agents, employees or representatives into whose care the volunteer has been entrusted to consent to any X-RAY, examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to the volunteer under the general supervision of the Medical Practice Act or to consent to any X-RAY, examination, anesthetic, dental or surgical diagnosis to treatment and hospital care to be rendered to the volunteer by a dentist licensed under the provision of the Dental Practice Act.					
I hereby consent to the use of my/my child's name, likeness, and speech in any audio tape, video tape, film or photograph made in any VNA Meals on Wheels of Dallas and the VNA Meals on Wheels Teen Board activity for the business or publicity purposes of VNA Meals on Wheels of Dallas. I understand that any participation offers no remuneration and that my child's name, likeness and speech may be edited, produced, recorded for duplication and distribution throughout the United States and abroad. I expressly release VNA Meals on Wheels of Dallas, its licenses, assignees, affiliates and successors from any privacy, defamation, or other claims I may have arising out of broadcast, exhibition, publication, or promotion of this program.					
Signature (Parent or Legal Guardian of Youth Volunteer)	Date				
Parent' Name (please print):					
Parent's Email:					
Parent's Cell:					
Preferred Hospital in case of emergency:					