

Presbytery of South Dakota

YOUTH COUNCIL MEMBERSHIP APPLICATION

NAME: First \_\_\_\_\_ M.I. \_\_\_\_\_ Last \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ CURRENT GRADE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CHURCH NAME & CITY: \_\_\_\_\_

Briefly answer the following questions: (If necessary, use back of form)

1. What activities are you involved in within the Church?

2. What skills and talents would you bring to the Youth Council?

3. Why would you like to be a member of the SDPYC?

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Copy as Needed

**Please hand in your application during the registration time at  
the Youth Rally.  
Attendance at the 2019 Youth Rally is Mandatory.**