

# Youth Connection

## Student Application Please Print Clearly

Full Name: \_\_\_\_\_

Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

High School: \_\_\_\_\_ Grade: 9 10 11 12

Shirt Size: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

How will you get to the rodeo grounds: Self Parent Friend

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Contact Numbers: \_\_\_\_\_

If you are accepted into this program, your volunteer time will include an orientation and behind the scenes tour of the Rodeo Complex along with a two hour or more work shift with a Horse Show Committee Mentor. **The attached waiver must be signed by your parent/guardian and NOTARIZED.** Anyone who does not return the notarized waiver along with the completed application will NOT be considered for participation in the Youth Connection Program.

Application due **Wednesday December 14, 2011.**

Mail to: Youth Connection C/O Horse Show Office  
P.O. Box 200230  
San Antonio, TX 78220.

Youth Connection Coordinator  
Chelsea Meyer  
(210) 260-9827  
sarodeoyouth@yahoo.com

## February 2012

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 <b>X</b>	2 <b>X</b>	3 <b>X</b>	4 <b>X</b>
5	6 <b>X</b>	7 <b>X</b>	8 <b>X</b>	9 <b>X</b>	<b><u>10</u></b>	<b><u>11</u></b>
<b><u>12</u></b>	13 <b>X</b>	14 <b>X</b>	15 <b>X</b>	16 <b>X</b>	<b><u>17</u></b>	<b><u>18</u></b>
<b><u>19</u></b>	20 <b>X</b>	21 <b>X</b>	22 <b>X</b>	23 <b>X</b>	<b><u>24</u></b>	<b><u>25</u></b>

**How to use this calendar:**

- Identify the date you can volunteer (Bold Dates Without X Only)
- Next look at the list of volunteer shift times below.
- Then list your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice. (Please list three choices)
- If you would like to work more than one shift please let us know **after** you have completed your first shift.

**Shift times:**

**Friday:** 5:00pm to 9:00pm

**Saturday & Sunday:** 10:30am-2:30pm, 12:00-4:00, 2:00-6:00, or 5:00-9:00

Choices	Date	Time
1 <sup>st</sup> Choice	_____	_____
2 <sup>nd</sup> Choice	_____	_____
3 <sup>rd</sup> Choice	_____	_____

Please assign me to one of the above mentioned shifts. My parents are aware and agree to the volunteer commitment I have made and understand that I can volunteer more shifts if I so desire.

Student Signature \_\_\_\_\_

Parents Signature \_\_\_\_\_

Date \_\_\_\_\_

Thank you for your interest! We look forward to working with you.