



The City of New Bedford Department of Parks, Recreation & Beaches (PRB) Youth Advisory Council is now accepting applications for teens ages 14-18 who want to make a difference in our community! This is a fun and exciting year-long experience with a manageable time commitment. Participants will be given the opportunity to make real change at the local level for how they want to see New Bedford's parks, trails, and beaches utilized as well as assisting in the development of recreational opportunities for young people and families in our city and beyond.

The PRB Youth Advisory Council takes part in fun, local campaigns to improve our open space and quality of life for all residents. Participants will be expected to join us on exclusive field trips and outdoor activities as well.

Apply today for an opportunity to effect change in our community, gain important social and environmental education, and pick up a new skill or hobby!

Refreshments will be served during in-person meetings.

LOCATION

Andrea McCoy Recreation Center
181 Hillman St. bldg. 8
New Bedford, MA 02740

(meetings will be held virtually as needed to comply with covid-19 regulations)

For more information please call the
Administrative Offices of Parks Recreation & Beaches at:
(508) 961-3015
or email us at:
info.prb@newbedford-ma.gov

**DEPT. PARKS, RECREATION & BEACHES
YOUTH ADVISORY COUNCIL
REGISTRATION FORM**

Please return to:

Info.prb@newbedford-ma.gov

We can accept photos of the fully completed registration form emailed to the address above if you are unable to scan to a computer. Please use a scan-to-pdf app or edit your photos prior to sending to improve quality so we can read the form.

Or mail to:

181 Hillman St. Bldg 3
New Bedford, MA 02740

First Name: _____ Last Name: _____

Address: _____

City: _____ Zip Code: _____

Date of Birth: ____/____/____ Preferred Language(s) Spoken at Home: _____

School or Program or indicate "other" if not presently enrolled: _____

Please indicate which days you live in New Bedford:

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Please indicate which timeframes work best for you, for meetings on a monthly or bi-monthly basis:

Weekdays/Weekends 3pm – 5pm 4pm – 6pm 5pm – 7pm 6pm – 8pm 7pm – 9pm Weekends 9am – 11am 10am – 12pm

Are you employed: Y ___ N ___ Participate in Athletics: Y ___ N ___ Currently Volunteering Your Time: Y ___ N ___

Do you help care for other family members after school: Y ___ N ___

Mode(s) of transportation you plan to use to attend in-person meetings: _____

Do you have an internet connection at home: Y ___ N ___ Can you join Zoom meetings if necessary: Y ___ N ___

The following information is optional. Answering these questions helps us in our commitment to diversity, equity and inclusion. This information also helps us understand how we may assist in helping PRB Youth Advisory Council members have a better experience in the program. Please fill out as much information as you are comfortable with providing. Leaving any or all of the below information blank will not affect your application.

Race: _____ Ethnicity: _____ Gender Identity: _____ Preferred Pronouns: _____

Religious Affinity: _____ Single Parent Household: Y ___ N ___ Emancipated Minor: Y ___ N ___

Mandatory Contact Information (to be completed in full)

Parent/Guardian: _____ Parent/Guardian: _____

Address: _____ Address: _____

City/ Town: _____ Zip: _____ City/ Town: _____ Zip: _____

Phone(s): _____ Phone(s): _____

May we text regarding emergencies/transportation concerns? Yes ___ No ___ Number: _____

Emergency Information (other than Parent/Guardian)

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

PROGRAM CONSENT AND WAIVER FORM

<p><u>Field Trips</u></p> <p>I give permission for my teen to attend all trips associated with the program. This includes field trips that may involve walking, running, biking, hiking, swimming, and use of indoor and/or outdoor recreational equipment including watersports. Trips may include overnight camping and all typically associated activities (including sleeping outdoors, building a campfire). Volunteer field trips may involve interacting with the public, interacting in settings where wildlife and/or livestock or shelter/sanctuary animals are present, and will require travel by bus. Field trips are intended to inspire teens and challenge teens' personal opinions and preconceived notions of the world we inhabit through new experiences.</p>	<p><u>Initial</u></p>
<p><u>Photo Release</u></p> <p>I hereby give permission for my teen's photograph to be taken and for him/her/them to be captured on video in connection with the activities of the Youth Advisory Council and to be used in media articles, on television, on the internet, and other presentations concerning the council program including program grant applications and reports.</p>	<p><u>Initial</u></p>
<p><u>Food Release</u></p> <p>I give permission for my teen to participate in all events that incorporate snacks and meals. The Dept. will determine appropriate refreshments for the Youth Advisory Council based on medical and allergy information of all council members provided upon acceptance into the Program. See: Allergies and Medical Conditions described below.</p>	<p><u>Initial</u></p>

<p><u>Allergies and Medical Conditions</u></p> <p>I understand that documentation of any known food allergies, allergies to substances or materials (such as latex), allergies to plants and/or animals and/or insects, hay fever or seasonal allergies, along with a description of the reaction(s) and the proper treatment of each potential allergic reaction will be requested upon acceptance into the Youth Advisory Council Program. Any allergy requiring medical treatment requires documentation from the primary care physician or medical specialist and will be submitted along with the medical form to be distributed by the Dept. upon acceptance into the Youth Advisory Council Program.</p>	<p><u>Initial</u></p>
<p><u>Attendance</u></p> <p>Regular attendance in person or online, and participation in on-site and off-site activities is essential to the function of the Youth Advisory Council. The Dept. is invested in working with the Youth Advisory Council to improve quality programs and recreation throughout the city, as well as improving parklands and other open space in New Bedford. To do so, the Youth Advisory Council requires strong commitment. The Dept. will work with council members to develop a regular schedule that is manageable in consideration of holidays, major school/program testing dates, and religious observances.</p> <p>Field trips are a component of the Youth Advisory Council and will be scheduled as funding and staffing allows. Council members are expected to participate in all field trips. Consideration of important dates as mentioned above will be taken in planning field trips to ensure all members may participate. The Dept. will work with council members on an individual basis as necessary to ensure field trips are equitable and accessible in consideration of factors such as but not limited to the needs of differently-abled members and cultural norms/taboo. Field trip notices and permission slips will be distributed to council members in advance to allow time for review of individual considerations. If applicable, rain dates will also be planned in advance.</p> <p>Local campaigns (such as but not limited to beach clean-ups and pollinator garden plantings) will be taken up by the Youth Advisory Council that require attendance at different locations throughout the city. Council members will be responsible for their own transportation unless otherwise noted. Council members will receive advance notice of any in-person, off-site meetings so they may plan in advance. Rain dates will also be planned out in advance.</p>	<p><u>Initial</u></p>
<p><u>Demeanor and Self-Care</u></p> <p>I understand that the PRB Youth Advisory Council requires teens to put their best foot forward both in their capacity as a council member and as New Bedford community members. It can be difficult to ask for help, but teens are expected to communicate with the Council Advisor so the dept may offer useful support or connect council members with supportive resources.</p> <p>Council members are expected to adhere to Youth Advisory Council rules of order during all meetings and related events. Some of these rules may take some practice, and teens are expected to practice applying PRB Youth Advisory Council rules of order to their everyday lives.</p>	<p><u>Initial</u></p>
<p><u>Late Pick Up</u></p> <p>I understand that the Youth Advisory Council Program pick up time at the end of each designated meeting or upon return from a field trip is to be strictly adhered to. Council members will not be transported home by PRB staff or volunteers. PRB staff and volunteers are also not responsible for teens who walk, bike, or drive themselves to and from meetings.</p>	<p><u>Initial</u></p>

Waiver

Initial

In consideration of this application and/or the right to participate in this activity, I or my teen, release the City of New Bedford, its employees, agents, representatives, and other persons or organizations for whose conduct the City may be responsible from any and all liability, loss damage, costs, claims and/or causes of action, including but not limited to all bodily injury claims and property damage resulting from or arising out of the use of premises, facilities, or equipment of the City of New Bedford, and/or caused in any way by the City of New Bedford, its employees, agents, representatives, and other persons or organizations for whose conduct the City may be responsible. I and/or my teen are in the necessary physical condition to participate in the registered activity. I authorize the staff to seek emergency medical care on my behalf or on behalf of my teen if needed. I will assume all costs associated with any such treatment. I have been informed of the program's policies. I fully understand this waiver and voluntarily accept its terms.

Parent/Guardian Signature: _____ Date: _____

Applicant Signature: _____ Date: _____