## ART & CULTURAL COMMISSION YOUTH MEMBER APPLICATION

Name:		Phone:	
Address:  Email:		Cell Phone:	
		Emergency	
		Contact: Relationship:	
School:		Emergency	
Date of Birth:		Contact Phone: Age:	
is public info	on you provide is don rmation and may be pr xperience including serv ns:	rovided to the public v	when requested.
Related Experience:			
	e on the Art & Cultural C Cultural Commission? (		
Date:	Signature:		
Attach resume if desir	ed.		

When completed please return to the City Clerk's Office at 375 Fifth Street or Email to: cityclerk@hollister.ca.gov