

Port Augusta YAC Registration Form

Join the Port Augusta Youth Advisory Committee (YAC)

Are you a dynamic young individual aged 12-18 residing, studying, or working in Port Augusta or Stirling North? Your city needs your voice! The Port Augusta City Council is excited to invite you to become a part of the Youth Advisory Committee (YAC) and play a vital role in shaping the future for the youth of Port Augusta.

Why Join the Port Augusta YAC?

Empower Your Voice: Be the catalyst for change! The YAC provides a platform for young minds to express their ideas, concerns, and aspirations for Port Augusta. Your voice matters, and we want to hear it!

Community Impact: Make a real impact on your community by actively participating in discussions about initiatives, projects, and events that directly affect young people in Port Augusta.

Skill Development: Develop valuable leadership, teamwork, and communication skills as you work with other like-minded individuals. This experience will be a stepping stone for personal and professional growth.

Fun and Friendship: Being in the YAC isn't just about serious talks and important projects - it's about having fun too! Dive into lively brainstorming sessions, organize cool events, and make new friends while making a real impact in Port Augusta.

How to Get Involved

Commitment: The YAC meets once a month to discuss various topics, plan events, and contribute to the development of youth-focused projects. Your commitment will make a significant difference.

Application Process: Interested individuals are encouraged to complete this application and email it to communitydevelopment@portaugusta.sa.gov.au or drop it into the Cultural Centre at 6 Beauchamp Lane Port Augusta.

Be the Change - Join Us Today!

Don't miss this incredible opportunity to be a part of the Port Augusta YAC and be the driving force behind positive change in our community. Your ideas matter, and together, we can create a vibrant and inclusive Port Augusta for all.







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Applicant Details

Full Name:						
Address:						
	Street address					
	Suburb					
Gender:	Age as of January 1 st :					
Email:						
Phone:	Preferred contact method:					
Do you consent to h	aving your photo taken by the Port Augusta City Council to promote the YAC?					
Are you currently at	tending school? Please specify where:					
List any organization	ns/ groups you are a part of (Sporting group, Community Club):					
Why are you interes	sted in joining the Port Augusta Youth Advisory Committee?					



Signature:

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What are you passionate about/enjoy doing? (playing sports, gaming, camping)

When are you able to attend YAC meetings? (example, 3:30pm Wednesday)

Monday	Tuesday	Wednesday	Thursday	Friday
Time:	Time:	Time:	Time:	Time:

Parent/ Caregivers details

Full Name:

Email:

Phone:

Relationship to the applicant?

Do you consent to the child participating in the YAC?

Do you consent to photos being taken of your child by the Port Augusta City Council to promote the YAC?