

Particinant's Name

PARTICIPANT



PARENT/GUARDIAN

JUNIOR FAIR ADVISORY BOARD FORM

Members should be residents in the northern 10 counties of Idaho and be age 15-21 as of January 1, 2024. There won't be a uniform or formal wear required, we just ask that you be mindful of clean and appropriate attire. Each member will also receive a name tag which should be worn when promoting the fair. All individuals meeting residential and age requirements as well as form deadline are eligible to partake as a Junior Fair Advisory Board member. Please see Committee Representative Application for additional opportunities.

Parent's Name:

Phone #: Phone #:			
Email:	Email:		
Age (as of Jan. 1): Grade:	Address:	Address:	
School:	City, ST, Zip:		
Please help us get to know you better!			
Community Involvement:			
Please indicate what organizations you are curren	tly involved in or have prior experience v	vith. (Mark all that apply.)	
	Currently Involved	Previous Experience	
Group	(Mark with an 'X')	(List years)	
4-H			
FFA			
Other Ag Program:			
Boy/Girl Scouts			
Other Youth Program:			
School Leadership Council			
Other programs or offices held?			
How did you hear about this opportunity?			
If you have a prepared resume, please submit wi	th this application.		
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Are you currently employed? Yes / No (Pleas	e circle one to let us know how this may	affect your availability).	
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Please explain why you are interested in joini			

Please submit application to the Fair Office or by email to blake@northidahostatefair.com.

acknowledging your responsibilities and willingness to cooperate.*