

## Youth Advisory Board Member Stipend & Gas Card Request Form

Name:

County/City:

Phone:

Email Address:

### Meeting Information

Name of Meeting/Call: \_\_\_\_\_

If meeting, where at?

Who is holding this meeting/call?:

\_\_\_\_\_

Date/Time: \_\_\_\_\_

Gas Card Needed?    Yes/No

Miles roundtrip: \_\_\_\_\_

Frequency of Meeting/Call?      One Time                      Regular Standing

If Standing Meeting, how often is it scheduled? \_\_\_\_\_

### Meeting Outcomes

Agenda/Purpose of the meeting:

\_\_\_\_\_  
\_\_\_\_\_

How did you contribute to the meeting/ What did you learn? (1-2 sentences):

\_\_\_\_\_



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