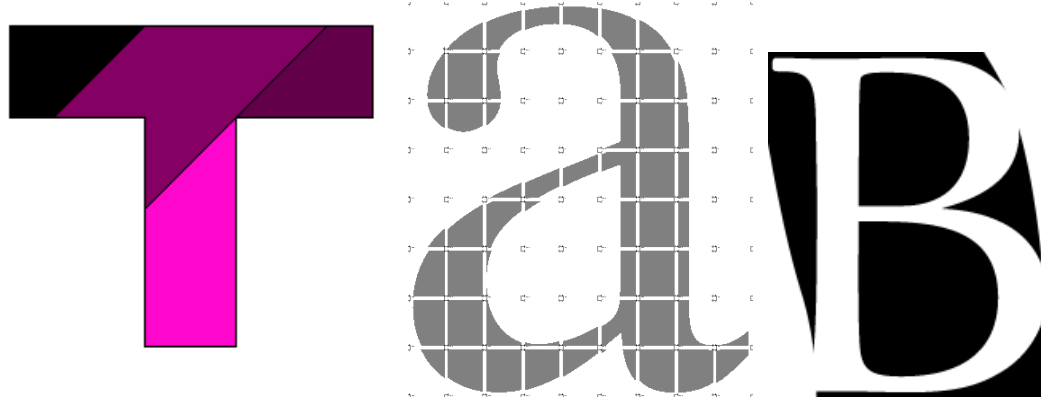


Teen Advisory Board



APPLICATION

Name _____

Address _____

City _____ Grade _____

Age _____ School _____ Phone _____

Email _____

1. WHAT KIND OF BOOKS DO YOU ENJOY READING? _____

2. WHAT KIND OF BOOKS DO YOU DISLIKE? _____

3. LIST THE LAST 2 BOOKS YOU HAVE READ. _____

4. WHAT TYPE OF MUSIC DO YOU LISTEN TO? _____

5. WHAT ARE YOUR HOBBIES/INTERESTS? _____
