



#203-2550 Shaughnessy Street  
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**I am interested in attending an orientation meeting of the A-DES**

***Youth Advisory Committee***

**Please contact me with the details of our first meeting.**

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of School: \_\_\_\_\_

School Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

School Telephone Number: \_\_\_\_\_

Name of Referring Teacher: \_\_\_\_\_