



# Cooperative Youth Ambassador Application

**Must be a junior in high school.**

*The Cooperative Youth Ambassador Leadership Program is designed to help younger generations learn about renewable energy, energy issues, and the business operations of a cooperative. Meetings are held during the week day at 12:00 with a lunch and ending at 2:00 p.m. at the Riverland Energy office in Arcadia. Field trips and youth conferences are exceptions.*

Student Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Birthday: \_\_\_\_\_ Sweatshirt Size: \_\_\_\_\_

High School: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent(s) Phone: \_\_\_\_\_

Any medical condition(s) we should be aware of: \_\_\_\_\_

I want to be a Riverland Energy Youth Ambassador because: \_\_\_\_\_

**Deadline October 15, 2021**

Send application to: Beth Alesch P.O. Box 277 Arcadia, WI 54612; Email: [balesch@riverlandenergy.com](mailto:balesch@riverlandenergy.com); or apply online: [www.riverlandenergy.com/programs/youth\\_ambassadors](http://www.riverlandenergy.com/programs/youth_ambassadors)

As the participating student, I agree to follow these rules:

- I will remain in the designated areas of all activities and will not leave the premises unless arrangements are made with the Riverland Energy staff and my parents.
- I understand that no alcoholic beverages or any illegal substances will be allowed.
- I understand that Riverland Energy may take photographs of participants and activities. I agree that Riverland Energy shall be the owner of and may use such photographs relating to the promotion of future programs. I relinquish all rights that I may claim in relation to use of said photographs.
- I understand that due to Covid-19, this program will be modified to provide a safe environment for students and may be canceled at any time.
- I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending an event or meeting and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I agree not to sue, discharge, and hold harmless Riverland Energy Cooperative, its employees, or directors of and from the Claims. I understand that this program is strictly voluntary.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_