



FOR YOUTH DEVELOPMENT®  
 FOR HEALTHY LIVING  
 FOR SOCIAL RESPONSIBILITY



## IDAHO YMCA YOUTH IN GOVERNMENT 2017 STATE SESSION REGISTRATION

Date: \_\_\_\_\_  
 School: \_\_\_\_\_  
 Advisor: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 School Phone: \_\_\_\_\_ Advisor Cell Phone: \_\_\_\_\_  
 Additional Advisor Name: \_\_\_\_\_  
 Additional Advisor's Cell Phone: \_\_\_\_\_  
 Total Number of Students: \_\_\_\_\_ x \$55      Total Registration Fee: \$ \_\_\_\_\_

COMPLETED REGISTRATION IS DUE BY **MARCH 6<sup>th</sup>, 2017**  
 Send to [Codi.Cronin@ymcatvidaho.org](mailto:Codi.Cronin@ymcatvidaho.org)

**Registrations not received by the due date may result in the delegation's information being omitted  
 in the State Session Bill Book.**

### SENATORS—YOU MAY BRING UP TO THREE

NAME (First and Last)	EMAIL	WILLING TO SERVE AS SENATE CHAPLAIN	WILLING TO SERVE AS COMMITTEE CHAIR

\*These are in addition to your Regional Conference elected officials



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**REPRESENTATIVES—YOU MAY BRING UP TO FIVE**

NAME (First and Last)	EMAIL	WILLING TO SERVE AT HOUSE CHAPLAIN	WILLING TO SERVE AS COMMITTEE CHAIR

\*These are in addition to your Regional Conference elected officials

**PARLIAMENTARIAN—YOU MAY BRING ONE**

NAME (First and Last)	EMAIL	HAS ATTENDED PREVIOUS STATE SESSION	HAS SERVED AS PARLIAMENTARIAN IN PREVIOUS STATE SESSION
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**DELEGATES-IN-TRAINING—YOU MAY BRING TWO**

NAME (First and Last)	EMAIL



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**LEGISLATIVE AIDE—YOU MAY BRING THREE**

NAME (First and Last)	EMAIL	MARK 1ST, 2ND, 3RD, CHOICE
		___ Sergeant-at-Arms ___ Secretary to a committee ___ Page ___ Assistant to the Secretary of State ___ Official Time Keeper  Check one: ___ House                      ___ Senate
		___ Sergeant-at-Arms ___ Secretary to a committee ___ Page ___ Assistant to the Secretary of State ___ Official Time Keeper  Check one: ___ House                      ___ Senate
		___ Sergeant-at-Arms ___ Secretary to a committee ___ Page ___ Assistant to the Secretary of State ___ Official Time Keeper  Check one: ___ House                      ___ Senate

**LOBBYIST—YOU MAY BRING ONE PER BILL SUBMITTED**

NAME (First and Last)	EMAIL	NAME OF BILL TO REPRESENT



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### REPORTER—YOU MAY BRING ONE

NAME (First and Last)	EMAIL

### ELECTED OFFICIALS—DECIDED AT THE REGIONAL CONFERENCE

NAME (First and Last)	POSITION	EMAIL

### MOOT COURT—DECIDED AT THE REGIONAL CONFERENCE

NAME (First and Last)	EMAIL