

BECOME A YOUTH SPONSOR

Please complete the information below. When you have finished completing the form, click **SEND** to process the form.

Organization Name: _____
Name of Contact Person: _____
Position/Title _____
Address: _____
Street: _____
City/State/Zip Code: _____
Phone: _____ **Cell Phone:** _____
E-mail: _____
Fax: _____

Please provide a brief description of the services and activities provided by your youth organization.

Identify organization's geographic service area, and the demographic profile of participating/eligible children (median household income, ages, sex, ethnicity).

Is there an income eligibility requirement for participants? _____

Membership fees ? _____

How does the organization currently market or advertise its youth programs and services, and recruit youngsters from the above community?

Can organization provide/coordinate transportation to and from riding program? (Riding program within a 45 minute drive from youth outreach service areas.)

If you have any questions regarding participation as a youth sponsor, please e-mail Barbara Zenker at citytosaddle@comcast.org or Leonora Giguere at Leonora@citytosaddle.org.

CLICK **SEND** WHEN YOU HAVE COMPLETED THIS APPLICATION. THANK YOU FOR YOUR INTEREST.