

**YOUTH OF THE YEAR AWARD ENTRY FORM**

Use additional sheets for all information; be specific, use format below.

A. FCRV activities for the past 12 months (May 1 – April 30). List all activity in each month even if repeated. 1-75

- |          |           |
|----------|-----------|
| January  | July      |
| February | August    |
| March    | September |
| April    | October   |
| May      | November  |
| June     | December  |

B. Previous FCRV activities, awards, participation. 1-5

C. Scholastic achievements and all school related activities for the past 12 months. 1-5

D. Other organizations involved with for the past 12 months. 1-5

E. Lessons participated in for all of part of the past 12 months. 1-5

Include a written resume of activities information; include Photostats and photos as needed. The award will be judged on the all-around participation of the youth.

1. The child’s parents must be FCRV members.
2. Youth will be up to and including 12 years. Age as of July 1<sup>st</sup> of the contest.
3. Official entry blank must be used. Application must be submitted by adult FCRV member.
4. All entries must be sent to the Nation Youth Directors, postmarked no later than May 1, and in national possession no later than May 10<sup>th</sup> before Campvention.
5. All entries become the property of the National Youth Director, and may be used to promote FCRV youth and its programs.
6. Awards will be presented to the winners at the same time other awards are given at the National Campvention.
7. Judges will be chosen by the National Youth Directors, and will follow the judge’s marking scale to determine winners. Judging will be complete prior to the National Campvention. ALL JUDGE’S DECISIONS ARE FINAL.

Entry Name \_\_\_\_\_

Phone \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Parent Name \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Entry Submitted by \_\_\_\_\_

Complete Address \_\_\_\_\_

CERTIFICATION:

This child’s parents are members in good standing of FCRV.

Date \_\_\_\_\_

Field/State/Provincial \_\_\_\_\_  
Director Stamp/Signature

Return by May 1<sup>st</sup> to  
National Youth Director