



**INSTRUCTIONS FOR NEW MEMBER APPLICATIONS**  
**FOR THE 2024-2025 YEAR**

Teens That Care (“TTC”) is excited to announce we are accepting applications for the 2024-2025 year. Our application period opens **February 15<sup>th</sup>, 2024** and **applications must be received via email on or before March 15<sup>th</sup>, 2024**.

All applicants must complete the *Teens That Care Application form, the Parent Responsibilities form, attach a Letter of Recommendation from a non-family member and answer the (3) questions listed on the application on a separate piece of paper.*

When considering applying for membership, please be aware of the requirements: Complete (30) volunteer hours by May 31<sup>st</sup>; attend regular monthly meetings which will be held on a **weekday evening from 7:00 – 8:00 pm meeting** (except June & July) at Clovis North High School Lecture Hall unless otherwise informed. Please note our first meeting will be a “kick off” social in August before school starts, location to be announced. Our organization runs year-round. **Our upcoming year begins June 1<sup>st</sup>, 2024 and ends May 31, 2025.**

All forms and applications **MUST** be signed by both the parent or guardian and the student. We will be accepting high school students entering grades 9-12. **Applications will be accepted by email only and must be received on or before March 15, 2024.** **NO EXCEPTIONS. Please remember that filling out and emailing this application does NOT guarantee membership.** You will be notified no later than April 15<sup>th</sup> of your membership acceptance status.

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**OBLIGATIONS OF MEMBERSHIP**

**Financial Obligation**

**Dues:** \$50.00 Annually and includes a TTC t-shirt and hoodie. Dues will be collected at orientation. Membership scholarships are available. If needed, please include a letter requesting waiver of dues with your application.

**Time Commitment:**

- There is a minimum commitment of (30) service hours per year.
- Mandatory attendance at all monthly meetings.

The following are just a few of the programs and organizations we are currently partnering with for volunteering opportunities:

- |                                            |                                   |
|--------------------------------------------|-----------------------------------|
| *Blanket Making                            | *Reading Heart                    |
| *Fresno PD “Building Better Neighborhoods” | *AMOR program in Mendota          |
| *R.I.D.E. bike program                     | *Pen Pals at Pinedale Elementary  |
| *PAL – Police Activities League            | *Saturday Sports                  |
| *Fresno Mission programs                   | *Big Red Church Food Distribution |

**2024-2025  
Membership Application**

**Teens That Care**, is accepting applications for students entering grades 9-12.

**Please write legibly when filling out the application, especially with email addresses!**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_ M/F \_\_\_\_\_

**Grade in Fall 2024:** \_\_\_\_\_ Have you applied to TTC before? \_\_\_\_\_

Birthday including year: \_\_\_\_\_

How did you hear about TTC: \_\_\_\_\_

Do you know a current member and if so their name: \_\_\_\_\_

Teen Cell: \_\_\_\_\_ Parent/Guardian Cell: \_\_\_\_\_

Teen email: \_\_\_\_\_

Parent/Guardian name and primary email: \_\_\_\_\_

Parent/Guardian secondary name and email: \_\_\_\_\_

School Attending in **Fall 2024:** \_\_\_\_\_

Clubs, Affiliations and Extracurricular Activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a sibling currently in TTC? If so, please provide their name \_\_\_\_\_

**Please answer the following questions and submit with your application.**

1. What do you know about Teens That Care and what activities interest you and why?
2. What experience have you had that inspires your desire to volunteer?
3. What after-school sports or activities are you involved in? Please give the name of the sport/activity and the season(s) you are involved.

**Please submit a Letter of Recommendation from an adult (other than a family member).**

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I have read the **Obligations of Membership** and would like to submit my name for membership in **Teens That Care**.

Teen Signature: \_\_\_\_\_

I have read the **Obligations of Membership** and **Parent Responsibilities** form and would like to submit my child's name for membership in **Teens That Care**.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**PARENT RESPONSIBILITIES FOR PARTICIPATION**

To ensure the safety and success of each teen, parents are responsible for getting their teens to meetings, volunteer programs and fundraising activities. While carpools may be offered for certain programs, it is not guaranteed.

Parent Confirmation of Understanding	Please Initial
Your teen may ONLY obtain hours from volunteering with the <b>Teens That Care</b> designated programs/opportunities that are listed on the SignUp app.	
Our year begins June 1, 2024 and ends May 31, 2025. All volunteer hours must be met within this time frame.	
Standards and Requirements – Confirm that any “at home” opportunities are completed per the description on the SignUp app. to receive hours.	
Your teen is responsible for completing (30) service hours and attending all monthly meetings on or before May 31, 2025. If your teen is a senior, hours need to be completed by April 30, 2025.	
A Parent/Guardian may be asked to chaperone “volunteer opportunities” throughout the year.	

**Name of Applicant:** \_\_\_\_\_

**Printed Name of Parent/Guardian:** \_\_\_\_\_

**Parent/Guardian**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

To be considered for membership please submit a) application b) include responses to 3 questions c) a letter of recommendation d) parent responsibilities form. **Applications must be received by email on or before March 15th, 2024 and acknowledgement will be confirmed within 72 hours.**

**Email all completed applications to:**

[teensthatcarefresno@gmail.com](mailto:teensthatcarefresno@gmail.com)

*It is your responsibility to contact us if you do not receive application confirmation*

If you need more information or have any questions, please email [teensthatcarefresno@gmail.com](mailto:teensthatcarefresno@gmail.com)

**Teens That Care Board**

Jenny Ganson, President/Director of Programs  
Dorothy Torosian, Secretary/Treasurer  
Lori Thomas, Public Relations/Awards

Brenda Kurtt, Fundraising/Development  
Carrie Berg-Mueller, Advisor