

Saginaw Chippewa Indian
Tribe of Michigan Youth
Council & Youth Group

2014-2015

Elections

Nominating Petition for Youth Council Candidacy

PLEASE BE ADVISED THAT DURING ELECTIONS, EACH CANDIDATES NAME, AGE AND SCHOOL NAME IS PLACED IN THE TRIBAL OBSERVER FOR ELECTION PURPOSES ONLY.

Candidate Name _____

Phone Number _____ Age _____

Email (optional) _____

School Name _____

PHOTO/VIDEO RELEASE SCIT YOUTH COUNCIL & YOUTH GROUP

By signing this photo/video release, you hereby give the SCIT Youth Council/ Youth Group the irrevocable right to use my name or my child's name, picture, portrait, or photograph in all form and in all media in all manners, without any restriction as to changes or alterations (including but not limited to composite or distorted representations or derivative works made in any medium) for advertising, publications, promotion, or other lawful purposes. I waive any rights to inspect or approve the photograph(s) or video(s) or finished version(s) incorporating the photograph(s) or video(s), including a written copy that may be created and appear in connection therewith.

I hereby release and agree to hold the SCIT Youth Council/Youth Group and all persons acting under its permission or authority from any liability arising with respect to any works mentioned in the paragraph above.

I agree that the photographer(s) own the copyright(s) in these photographs and hereby wait any claims I may have based on usage of the photograph(s), or video(s) or work derived there from, including but not limited to claims of either invasion of privacy or libel. I am the guardian or parent of the said child noted below and I am of full age and competent to sign this release. I agree that this release shall be binding on my legal representatives, my heirs, assigns, and me. I have read this release and am familiar with its contents.

I further agree that I will not receive payment for participation in said photograph(s), or videotape(s) produced by the SCIT Youth Council/Youth Group, the Saginaw Chippewa Indian Tribe of Michigan and its employees.

Name of Parent or Guardian Printed

Parent of Guardian Signature

Date

Name of Child Printed

Child Signature

Date

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The overall vision of the SCIT Youth Council is to have more youth involvement in the community to provide activities that lead youth into a positive direction that influences healthier lifestyles without alcohol or drug abuse.

We, the undersigned Native American youth, hereby nominate: _____ as a candidate for the office of Youth Council to be selected at the election to be held on November 10, 2014.

By signing this petition you support my leadership to run for the 2014-2015 SCIT Youth Council elections. My candidacy represents all youth in our community.

	Name	Tribal Affiliation	Age
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

Certificate of Circulator

The undersigned circulator of the petition asserts; that he/she is qualified to circulate this petition; that each signature on the petition was signed in his/her presence; that to his/her best knowledge and belief, each signature is the genuine signature of the person purporting to sign the same and that the person was, at the time of signing, qualified to sign the petition.

Signature of nominee _____ Date _____

For Certifiers Only:		
Advisor Printed	Advisor Signature	Date