



NEW JERSEY - NEW YORK FRATERNAL ALLIANCE

Re: 2025 Youth Volunteer Award

Dear Society Member,

One of the most important fraternal programs offered by the New Jersey – New York Fraternal Alliance is its Youth Volunteer Award Program. Each year the NJNY FA chooses deserving students from a member society, based on their volunteer achievements with their society as well as the community at large. Award winners each receive a \$500 check. An individual can only receive the award once.

Notice of the award and application form may be published in your communications and posted on your Society's website. The deadline for submitting applications is **September 1, 2025**, postmark. All completed applications and supporting information are to be mailed to:

Robert Galdon Jr., Chairperson
NJNY FA Youth Volunteer Award Committee
P.O. Box 37
Hibernia, NJ 07842

E-mail: germaniabob@gmail.com Phone: 201-247-6750

The Youth Volunteer Award Committee of the NJNY FA will make the selection of the award recipients and all decisions are final. This year's recipients will be recognized at the Alliance's Annual Convention on October 2, 2025 at the Tropicana Atlantic City.

Sincerely,

Robert Galdon Jr., Chairperson

Bryan Werner

Thomas DiLauro

NJNY FA Youth Volunteer Award Committee

NEW JERSEY – NEW YORK FRATERNAL ALLIANCE

2025 YOUTH VOLUNTEER AWARD APPLICATION

Please print or type

Name: _____

Telephone: _____ E-mail: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

Your Fraternal Benefit Society: _____

Civic (non-school) Activities*: _____

Fraternal Benefit Society Activities*: _____

*Information can be submitted on a separate sheet of paper. Please type or print.

Rules/Regulations/Requirements

Applicant must:

1. Be a current member for at least 1 year of a Member Society of the New Jersey-New York Fraternal Alliance.
2. Be between the age of 16 and 22 at the time of application
3. Obtain a recommendation letter from your Fraternal Benefit Society
4. Sign the *Statement of Application* below
5. Additional documentation may be submitted
6. Return the completed application and letter of recommendation, postmarked no later than **September 1, 2025** to:

Robert Galdon Jr., Chairperson
NJNY FA Youth Volunteer Award Committee
P.O. Box 37
Hibernia, NJ 07842

E-mail: germaniabob@gmail.com Phone: 201-247-6750

\$500 award to the recipient

This is a one-time award

Judging will be done by the Youth Volunteer Award Committee of the NJNY FA

Recipients will be notified by mail and will be recognized at the Alliance's Annual Convention.

STATEMENT OF APPLICATION

I understand that my selection for this award is based upon my answers to these questions; and further that my application is in competition with other eligible persons and that the decision of the NJNY FA is final. This application is completed with my knowledge and consent, and false information will void the award. The information that is provided in this application is true and complete.

Signature of Applicant