

# *MAB Foundation Student Advisory Committee*

## **STUDENT OVERVIEW**

The MAB Foundation is the non-profit, 501(c)(3) organization to the Michigan Association of Broadcasters (MAB). Founded in 1994, the MAB Foundation's mission addresses a need to preserve the history of broadcasting in Michigan as well as to promote broadcasting as a career choice to young people. In an effort to better reach Michigan's students and young people, the MAB Foundation Student Advisory Committee was formed in July 2009. This committee is looking for bright, forward-thinking individuals who are currently enrolled in a Michigan high school, college, university or trade school to offer their input in the planning of the Foundation's future events and programs. Applicants must have demonstrated leadership skills in their schools and in their communities. This committee will include six (6) college students and three (3) high school students. Committee members will be highlighted in various MAB communications throughout the year as well as looked upon for student perspectives on various issues. All committee recommendations and notes will be presented to the MAB Foundation board for consideration as well as to other MAB Foundation committees as it relates.

### **Meetings**

Committee members will be expected to attend two meetings, in-person at the Broadcasting Career Builder Conference (BCBC) in November and a conference-call in the spring, following the Great Lakes Media Show. Travel reimbursement is available if needed to attend the in-person meeting. Two (2) members of the MAB Foundation board will also attend each committee meeting. Missed committee meetings for non-emergency purposes may result in dismissal from the committee. At its first meeting, this committee will elect a Chairperson to serve a one-year term as Chair. That person will be invited to attend all MABF board meetings and report on the activities and recommendations of the Student Advisory Committee.

### **Terms**

Terms will begin as one-year terms and may vary depending on the year in education of the committee member, but, in no case, will any term be longer than three years.

### **Applying**

The application process is open to any student enrolled in a Michigan high school, college, university or trade school who applies and has the recommendation of a counselor, advisor and/or teacher along with parental approval for individuals under the age of 18. Students who apply for this committee must be familiar with the broadcasting industry either through broadcast-related courses in school or through employment at a broadcast-related company and/or station.

### **Selection Process**

The MAB Foundation's Education and Scholarship Committee will review all applicants and recommend six (6) college students and three (3) high school students to the MAB Foundation board for ratification. The recommendations will be based on applicant's recommendations, essay, educational experiences, ideas for the MAB Foundation and broadcast media experience. The selected students will be notified as soon as the selection has been made. All applicants under the age of 18 must have a parent or legal guardian complete and sign the appropriate consent form and all applicants 18 years of age and older must complete and sign the other appropriate consent form. All forms must be completed and returned to the MAB Foundation office by the deadline. The MAB Foundation does not discriminate on the basis of race, color, creed, national origin, sex, disability, or age in its programs and activities.



## APPEARANCE CONSENT AND RELEASE

I hereby consent to the Michigan Association of Broadcasters (“MAB”) and the Michigan Association of Broadcasters Foundation (MABF) photographing or videotaping myself and recording my voice and consent to the MAB’s use of those photographs, videotapes and/or recordings singularly or in conjunction with other photographs, videotapes and/or recordings for advertising, publicity, commercial or other business purposes in any form of media.

I authorize the MAB/MABF to reproduce and use said photographs and videotapes of my person and/or recordings of my voice in all domestic and foreign markets. Further, I agree that others, with the consent of the MAB/MABF, may use and/or reproduce such photographs, videotapes and/or recordings.

I hereby release and discharge the MAB/MABF, its directors, officers, employees, and agents, as well as the MAB/MABF’s members, affiliates, and advertising agencies and their directors, officers, employees, and agents from all claims of every kind on account of their publication or other use of those photographs, videotapes, and/or recordings .

Print Name: \_\_\_\_\_

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

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

If subject is under 18: I, \_\_\_\_\_, am the parent/legal guardian of the individual named above, I have read this Appearance Consent and Release, and, by signing it in the space provided above, agree to and approve all of its terms.



# MAB Foundation Student Advisory Committee

## STUDENT APPLICATION

Complete one application per student. Please print or type clearly.

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

School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Educational Program/Major (college only): \_\_\_\_\_

Expected Year of Graduation: \_\_\_\_\_

List any committee on which you have served and the year(s) of service: \_\_\_\_\_  
\_\_\_\_\_

Organizations to which you belong (professional, technical, community, charity): \_\_\_\_\_  
\_\_\_\_\_

I understand that any or all information on this form may be verified.

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

### Attach to this application form:

- ◆ *Resume*
- ◆ *On a separate sheet of paper please type 200-300 words about your thoughts on improving the MAB Foundation and its services, programs and events or on what you see as the future of the MAB Foundation.*
- ◆ *At least one recommendation letter from an academic advisor.*
- ◆ *Complete and signed consent forms.*

Please return application packet to:



820 N. Capitol Ave. Lansing, Michigan 48906  
PH: 800.968.7622 FX: 517.484.5810  
mabf@michmab.com www.michmab.com

*Preserving and promoting Michigan's broadcast industry...*

*MAB Foundation Student Advisory Committee*

**ADULT CONSENT FORM**

*For applicants 18 years of age or older.*

**ASSUMPTION OF RISK, RELEASE, AND INDEMNITY AGREEMENT**

I, \_\_\_\_\_, voluntarily chose to become a member of the Student Advisory Committee (“SAC”) of the Michigan Association of Broadcasters (“MAB”) and the Michigan Association of Broadcasters Foundation (“MABF”) and to participate in meetings conducted by the MAB and/or the MABF. I am aware that participation on the SAC may require me to travel to meetings and other events and I understand that I will not become an employee of the MAB or the MABF and that I will not be entitled to any compensation or reimbursement for my participation.

In consideration of being allowed to participate as a member of the SAC and to obtain the benefits of membership: (a) I voluntarily assume all risk of personal injury and property loss or damage resulting from my participation on the SAC; (b) I voluntarily waive, discharge and release all claims, both present and future, that I may have against the MAB, the MABF, and their members, directors, officers, and employees (“The Released Parties”) arising from my participation as a member of the SAC, including but not limited to claims for property damage or loss, personal injury, and wrongful death; and (c) I voluntarily agree to indemnify and hold The Released Parties harmless from all claims which may be brought or asserted against them by any person arising from my participation on the SAC, including their costs and attorneys fees incurred in defending such claims.

I agree that should any terms of this Agreement be determined to be unenforceable, the validity of the remaining terms shall not be affected and this Agreement shall be enforced as if the unenforceable term(s) had not been included.

I represent that my date of birth is \_\_\_\_\_, that I am 18 years old or older, and that I am competent to execute this Agreement. I acknowledge that I have read this Agreement and understand all of its terms and their possible consequences to me, have had ample time to consider whether or not to sign it and to obtain legal advice about whether or not to sign it, and understand that by signing this Agreement I am waiving and giving up legal rights and/or remedies which might otherwise be available to me.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

Date \_\_\_\_\_

\_\_\_\_\_  
WITNESS

# MAB Foundation Student Advisory Committee

## UNDER 18 CONSENT FORM

*For applicants under the age of 18. Parents or official guardian must complete and sign.*

### ASSUMPTION OF RISK, RELEASE, AND INDEMNITY AGREEMENT

I, \_\_\_\_\_, am a parent or the legal guardian of \_\_\_\_\_ (“Student”). I hereby give Student permission to become a member of the Student Advisory Committee (“SAC”) of the Michigan Association of Broadcasters (“MAB”) and the Michigan Association of Broadcasters Foundation (“MABF”) and to participate in meetings conducted by the MAB and/or the MABF. I am aware that participation on the SAC may require Student to travel to meetings and other events and I understand that Student will not become an employee of the MAB or the MABF and that Student will not be entitled to any compensation or reimbursement for his/her participation on the SAC.

In consideration of Student being allowed to participate as a member of the SAC and to obtain the benefits of membership: (a) I voluntarily agree that Student assumes all risk of personal injury and property loss or damage resulting from Student’s participation on the SAC; (b) I voluntarily waive, discharge and release all claims, both present and future, that Student or I may have against the MAB, the MABF, and their members, directors, officers, and employees (“Released Parties”) arising from Student’s participation as a member of the SAC, including but not limited to claims for property damage or loss, personal injury, and wrongful death which Student has before or after reaching the age of majority; and (c) I agree to indemnify and hold The Released Parties harmless from all claims which may be brought or asserted against them by any person arising from Student’s participation on the SAC, including their costs and attorneys fees incurred in defending such claims.

I agree that should any terms of this Agreement be determined to be unenforceable, the validity of the remaining terms shall not be affected and this Agreement shall be enforced as if the unenforceable term(s) had not been included.

I acknowledge that I have read this Agreement and understand all of its terms and their possible consequences to me and to Student, have had ample time to consider whether or not to sign it and to obtain legal advice about whether or not to sign it, and understand that by signing this Agreement I am waiving and giving up legal rights and/or remedies which might otherwise be available to me and/or to Student.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

Date \_\_\_\_\_

\_\_\_\_\_  
WITNESS