Islands Youth Parliament

Application Package & Background Information

Mount Douglas Secondary School, 3970 Gordon Head Rd, Victoria, BC V8N 3X3 31st Parliamentary Session May, 2-4, 2025



WHAT IS IYP?

The Islands Youth Parliament (IYP) is a project of the BC Youth Parliament (BCYP), a youth organization that recognizes every young person's potential to lead and serve within their community. The Islands Youth Parliament is a simulation of the Westminster Parliamentary process, providing an opportunity for youth ages 14–18 to develop skills in leadership, organization, public speaking, and knowledge of societal affairs. BCYP is not affiliated with any political party and is a non-profit organization. For detailed information about IYP's and BCYP's activities, visit our website at: www.bcyp.org/ryps.

WHO CAN ATTEND?

Each year, youth will be 'elected" to IYP as representatives of their communities. Each applicant must be nominated by an organization committed to youth, such as a school, community group, club, municipality, or place of worship. Five members of that group must indicate their support for the applicant by signing the application form.

To be eligible for membership, you must be:

- 1. Age 14–18 (inclusive) as of Dec. 31, 2025;
- 2. A resident of the Islands region including: Vancouver Island and the Sunshine Coast
- 3. Nominated by an organization committed to youth.

IYP'S ACTIVITIES

IYP's year begins with the Parliamentary Session from May 2-4. Members meet at the assigned location and use the Westminster Parliamentary style of debate to discuss issues of local, national, and international importance.

At Session, Members:

- Meet young people from across the region;
- Debate collaboratively about a variety of current issues;
- Learn about debating and the rules of parliamentary procedure;
- Elect the Premier and Leader of the Opposition for IYP's 32nd Parliament.

After session, members will have the opportunity to participate in fundraising, social, and service events sponsored by the British Columbia Youth Parliament.

SESSIONAL ARRANGEMENTS

Session runs from approximately 4:30 PM on Friday, May 2nd (with a check in time at 4:00 PM) to 4:00 PM on Sunday, May 4th. Members are required to attend all of session, and must contact the Chief Returning Officer before applying if this presents a problem. The registration fee includes a new member welcome package delivered to all new Islands Youth Parliament members, and a sessional journal produced in the style of the BC Legislature for all members to commemorate the event, alongside organizational costs to run the event, such as meal and travel expenses.

PRE-SESSIONAL INFORMATION

The Chief Returning Officer will notify all applicants by email or mail as to their acceptance status soon after the application deadline. Accepted members are provided with an orientation package prior to session.

APPLICATION PROCEDURE

Complete the attached application form and mail it along with your personal statement to:

Lucia Enrich Davis

Chief Returning Officer 156 Bird Sanctuary Drive Nanaimo, British Columbia V9R 6G9 iyp@bcyp.org

Applications must be RECEIVED by April 26th by mail or email attachment. If you send the application by email attachment, please mail the original signed copy to the address above.

REGISTRATION FEE

The registration fee for each member is **\$50**. Payment may be submitted in the form of an e-transfer to <u>finance@bcyp.org</u> with the password "RYPS2025" with the applicant's name in the description of the e-transfer. **Any acceptance is not final until a registration fee is received.**

We are **NOT** able to receive credit card payments. Registration fees will be held onto (but not cashed) for those on the waitlist, and returned to those not accepted.

For applicants who are in financial need, a limited amount of financial support is available For more information, please contact the Chief Returning Officer before the application deadline, and attach a letter of request along with your application form.

CANCELLATION

Accepted members who cancel on or before April 27th will receive a refund of their registration fee minus a \$10 cancellation fee. **No refunds will be issued to any member canceling after April 28th.**

APPLICATION FORM – 31st Islands YOUTH PARLIAMENT

LAST NAME:	FIRST NAME:			
PHONETIC PRONUNCIATION OF NAME:				
PRONOUNS (OPTIONAL):				
GENDER:	DATE OF BIRTH:			
PRIMARY EDUCATIONAL INSTITUTION:				
CURRENT ADDRESS				
STREET / PO BOX:				
CITY:	POSTAL CODE:			
HOME PHONE: ()	CELL PHONE: ()			
PRIMARY EMAIL ADDRESS:				

COMMUNITY NOMINATION

THE F	OLLOWING MEMBE	RS/STUDEN	TS OF						
(NAM	E OF ORGANIZATIO	N/SCHOOL)							
NOM:	NOMINATE, ,			_, A MEN	, A MEMBER/STUDENT OF OUR				
ORGA	NIZATION/SCHOOL	. TO SIT AS A	AN IYP MEMB	ER.					
	NOMINATING SI nization/school):	IGNATURES	REQUIRED	(other	member	s or	students	of	the
	FULL NAME		RELATION			EMAIL ADDRESS			
I									
II									
III									
IV									
V									

PERSONAL STATEMENT

At the Parliamentary Session, members participate in collaborative debate, and engage in a number of skill-building workshops.

If you are a new member to IYP, please attach a **one-page** personal statement outlining why you would like to become a member, the other activities with which you currently are (or plan to become) involved with in your community, and how you believe you can personally contribute to IYP.

YOUTH PARLIAMENT EXPERIENCE

How did you first hear about IYP? (Please choose one option)	
☐ Facebook/Instagram	
☐ From a teacher (Who?)	
☐ From a group leader (Who?)	
☐ Through a Regional Youth Parliament (Which one?)
☐ From a member or alumnus of BCYP or a RYP (Who?)
☐ Saw a poster/brochure (Where?)	
☐ Other (please specify:)	
EMERGENCY MEDICAL INFORMATION AND CONTACT	
B.C. Medical Number (i.e. CareCard Number):	
Name of parent or guardian:	
Phone number(s): () or ()	
Name of alternative contact:	
Phone number(s): () or ()	
Food allergies and/or dietary restrictions:	
Accessibility Needs:	
Any other Information You'd like the Organization team to be aware of:	

Please Note: Unless arrangements are made in advance, participants will be expected to administer any and all of their own medication that's been prescribed to them. Please notify the Chief Returning Officer of any chronic medical problems (i.e. severe asthma, allergies) that might require emergency treatment, and explain the emergency treatment that might be necessary.

APPLICATIONS MUST BE RECEIVED BY April 26th

WAIVER

In consideration for acceptance to Islands Youth Parliament (IYP), the undersigned on behalf of the Applicant and all heirs, executors, and administrators, waives any and all claims for damages against IYP, the British Columbia Youth Parliament (BCYP), and the Youth Parliament of British Columbia Alumni Society and their directors, officers, and agents for any and all injuries of loss which the Applicant may suffer during, or in connection with any IYP Session, trip, or any other activity.

Parental Consent: "I have read the accompany attend Islands Youth Parliament." (Mandator	ing material and do hereby allow my child/ward to
Printed Name of Parent or Guardian	Printed Name of Applicant
Signature of Parent or Guardian	Signature of Applicant
Date	
Ambassadors who wish to come from out of to in the homes of fellow IYP members from the s	the duration of IYP.
Printed Name of Parent or Guardian	Printed Name of Applicant
	······································
Signature of Parent or Guardian	Signature of Applicant
 Date	

PUBLICITY AND PROMOTIONAL CONSENT

From time to time, the Islands Youth Parliament or British Columbia Youth Parliament may use individual or group photos of members for promotional purposes in newspapers, on bulletin boards at Youth Parliament events, on web pages, in press releases, in media packages, in newsletters and in slide or video shows.

Parental Consent: "I hereby do consent to my child's /ward's name and photo being used for publicity and promotional purposes. I understand that if I do not consent to the use of my child's/ward's likeness in public relations materials, my child/ward may be excluded from certain activities or events at Session, including the official group photo." (Optional)

Printed Name of Parent or Guardian	Printed Name of Applicant
Signature of Parent or Guardian	Signature of Applicant
 Date	

PERSONAL INFORMATION CONSENT

For the purpose of enabling members to fully participate in the organization's activities after session, Islands Youth Parliament distributes members' contact information throughout the organization in order to keep them informed of IYP's and BCYP's events and activities.

Parental Consent: "In accordance with the Perconsent to my son's/daughter's/ward's contact in Parliament Journal." (Optional)	,
Printed Name of Parent or Guardian	Printed Name of Applicant
Signature of Parent or Guardian	Signature of Applicant
Date	