

**APPLICATION FOR SERVICE ON ADVISORY BOARDS
FOR THE TOWN OF HUNTERSVILLE**

Please type or Print in Black Ink

NAME OF ADVISORY BOARD ON WHICH APPLICANT IS INTERESTED IN SERVING:

PARKS AND RECREATION COMMISSION

BACKGROUND INFORMATION

NAME _____ HOME PHONE _____

HOME ADDRESS _____ ZIP CODE _____

E-MAIL ADDRESS _____

PRESENT OCCUPATION _____ WORK PHONE _____

PLACE OF EMPLOYMENT _____

APPROXIMATE HOURS AVAILABLE PER MONTH FOR SERVING ON ADVISORY BOARD _____

NAME OF ANY TOWN OR COUNTY BOARDS/COMMITTEES/COMMISSIONS YOU ARE PRESENTLY
SERVING ON:

_____ EXPIRATION DATE _____

_____ EXPIRATION DATE _____

EDUCATION _____

BUSINESS AND CIVIC
EXPERIENCE _____

AREAS OF EXPERTISE AND INTERESTS/SKILLS _____

I, the undersigned, understand this application will be kept on the active file for a two (2) year period only.

(Signature of Applicant) _____ (Date)

(Submitted by)

The Town of Huntersville Board of Commissioners sincerely appreciates the interest of all citizens in the Town's advisory committees. Applications may be sent to:

**HUNTERSVILLE PARKS AND RECREATION DEPARTMENT
P.O. BOX 2879
HUNTERSVILLE, NC 28070**

For more information on the responsibilities of the Parks & Recreation Commission, applicants may contact the above office at (704) 766.2220