

NOMINEE FOR THE CLCA BOARD OF DIRECTORS

***Application must be received no later than May 1st**

Name: _____

Address: _____

Employment experience that would be helpful as a Board of Director: _____

Life experience that would be helpful as a Board of Director: _____

Association Committee Involvement: _____

Other professional, Civic or Special Interest Committee or Group Involvement: _____

Association interests: _____

What do you envision for the Community over the next three to five years? _____

I acknowledge that I have been informed of my possible nomination for membership on the Board of Directors and that I will accept the responsibility as described by the By-Laws, if elected:

Signed: _____ Date: _____ (Ed 09/18)