

BOARD MEMBER APPLICATION FORM

Appli	cant Name
Home Address	
Phon	e
Emai	l
Addr	ess(es) Property Owned (if applicable)
HOV	V IS THE APPLICANT QUALIFIED TO SERVE (check all that apply)
	Registered voter living within the district
	Own real property or be a representative of an entity owning real property within the district
	Represent a business physically located in the district
QUA	ALIFICATIONS OF APPLICANT (may attach additional sheets/resumé)
ADE	DITIONAL INFORMATION FOR NOMINATION COMMITTEE TO CONSIDER
	se return to: ew Walls, CID Board Member and Secretary

Or deliver to CID Board Member or to CID public meeting (board meets 2nd Wed of each month at 10am at Drury on C-Street).

For information regarding the CID: www.historicCstreet.com

CID@historicCstreet.com