

The Corporation of the Town of Deep River

Application for Appointment to 75th Anniversary Committee

Name:
Home Address:
Mailing Address:
Email:
Telephone Number:
Occupation:
I am a qualified elector in the Town of Deep River - Please indicate: Yes or No
1. Name of Board or Committee you are interested in applying for (you may specify more than one)
2. Have you previously served on a Board, Commission, Committee or other Organization? Please specify:
3. Please identify reasons for being interested in the above Board or Committee and/or any background experience:
4. Would you be available to attend meetings when called?
(a) During Business Hours – Please indicate Yes or No
(b) In the Evening Hours – Please indicate Yes or No
Signature of Applicant
Date