



TOWN OF YORK APPLICATION FOR MEMBERSHIP

TOWN BOARD, COMMITTEES AND COMMISSIONS

| PLEASE FILL OUT AND RETURN TO THE TOWN MANAGER'S OFFICE |

Name: _____

Physical Address: _____

Mailing Address: _____

Home Telephone: _____ Mobile Telephone: _____

Email: _____ State of Residency: _____

Why do you wish to serve? _____

What expertise can you provide? _____

PLEASE CHECK THE BOARD(S), COMMITTEE(S) OR COMMISSION(S) YOU WISH
TO APPLY TO FOR MEMBERSHIP CONSIDERATION:

<input type="checkbox"/>	Appeals Board	<input type="checkbox"/>	Parks and Recreation Board
<input type="checkbox"/>	Assessment Review Board	<input type="checkbox"/>	Planning Board
<input type="checkbox"/>	Cable TV Regulatory Commission	<input type="checkbox"/>	Senior Citizens Advisory Board
<input type="checkbox"/>	Conservation Commission	<input type="checkbox"/>	Shellfish Conservation Commission
<input type="checkbox"/>	Energy Efficiency Steering Committee	<input type="checkbox"/>	Sohier Park Committee
<input type="checkbox"/>	Harbor Board	<input type="checkbox"/>	York Harbor Site Design Review Board
<input type="checkbox"/>	Historic District Commission	<input type="checkbox"/>	York Housing Authority
<input type="checkbox"/>	Municipal Social Services Review Board	<input type="checkbox"/>	Other:

BELOW IS FOR OFFICE USE ONLY

Received Date: ____/____/____ Received By: _____

Interview Date: ____/____/____ Appointment Date: ____/____/____