



## Zorra Local School Committee

### Volunteer Application Form

Name:	Home Address:
Phone Number:	Email Address:

Are you available to meet during the day?	Yes	No (Circle one)
Are you available to meet during the evening?	Yes	No
Which Township of Zorra school would you be representing:		
Please summarize your involvement with the school(s) in Zorra Township:		
Please outline why you are interested in joining the Zorra Local School Committee:		

Thank you for your interest!

**Please send your completed application to [kmartin@zorra.on.ca](mailto:kmartin@zorra.on.ca)**