



Zorra Recreation Advisory Committee Application Form

Name

Home Address

Home Phone

Cell Phone

Home E-mail

Work (if applicable) Company & Address

Are you available to meet during evenings? Yes No

Please summarize your experience with and/or interest in recreation in Zorra Township.

What new ideas would you bring to the Zorra Recreation Advisory Committee?

Please briefly outline your past experience as a volunteer, board and/or committee member.

What skills and knowledge would you bring to our Committee? Please indicate your experience in the following areas.	Very Experienced	Some Experience	Little or No Experience
Recreation programming			
Knowledge of recreation facilities			
Program planning and evaluation			
Strategic planning			
Communication, public and media relations			
Other relevant skills/knowledge:			

THANK YOU!