



## Board/Committee Application

Name of Board/Committee: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Bus Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Legal Land Description: \_\_\_\_\_

Relevant experience and/or employment (attach resume if relevant):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why are you interested in this organization? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Area(s) of expertise/contribution you feel you can make: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other volunteer experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List any other board(s)/committee(s) you have served on: \_\_\_\_\_

\_\_\_\_\_

Please submit application to:  
Legislative Services  
Foothills County  
Box 5605, 309 Macleod Trail, High River AB T1V 1M7  
Email: [legislative.services@foothillscountyab.ca](mailto:legislative.services@foothillscountyab.ca)

\*This information is being collected in accordance with the Municipal Government Act and will be managed and compliant with Section 33(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection please contact the Foothills County FOIP Coordinator at 403-652-2341.

Fill out form - save to your computer and attach to email to submit, or fill out form, print and mail or deliver in person.