

Adults 50+ Sports and Fitness Advisory Committee Application

Name _____

Address _____

Telephone _____

Email _____

Resident of District Yes No

(A link of the CPRD boundary map can be found at the bottom of the CPRD homepage at www.cprdnewberg.org.)

Reasons you wish to serve on this committee

(Attach additional sheets if necessary.)

Other community involvement

(Attach additional sheets if necessary.)

Signature _____

Date _____