

NOTICE OF INTEREST
TO SERVE ON HHRCA COMMITTEE

NAME: _____

ADDRESS: _____

TELEPHONE NUMBERS:

Home _____ Cell _____ E-mail _____

BRIEF BIOGRAPHY:

Number of years lived in HHR? _____

COMMITTEE INTERESTED IN SERVING:

Reasons for interest in serving on above committee? _____

Special Interest/Qualifications: _____

Have you served on previous committees?

If yes, please list. _____

Signed: _____

Date: _____