

COMMUNITY SERVICES ADVISORY BOARD VOLUNTEER MEMBER APPLICATION

The Community Services Advisory Board is seeking new volunteer board members. The purpose of the Board is to provide recommendations to the Town of Bon Accord Administration and Council on community events and programs, and to help promote citizen awareness of the importance of these programs. Programs include those focused on preventative social services, recreation, and culture and are directed at residents of all ages. Meetings are held 4 (four) times per year.

Applicant Na	ame
Street Addre	ess
Mailing Add	ress
City or Town	Postal Code
Phone num	ber
Email	
rec Cor	ould my application for the Community Services Advisory Board be successful, I hereby agree to eive email communications relating to the Community Services Advisory Board as part of the mmunity Services Advisory Board email group. plying as a Youth Representative)
	ate the Community Services Advisory Board Position you are applying for:
	e rs from the Community at Large Ints must reside in the Town of Bon Accord. Term of office is two (2) years.
	' Representative nts must be age 60 or older and must reside in the Town of Bon Accord. Term of office is two (2) years.
Applicar	Representative Ints must be between the ages of 14 and 18; must reside in the Town of Bon Accord or rural Sturgeon County, 5; and be attending Junior or Senior High School. Youth members are appointed for a one (1) year term.
Rural R	esident hts must reside in rural Sturgeon County, Division 5. Term of office is two (2) years.

All Community Services Advisory Board appointments are reviewed by the Community Services Advisory Board and must be appointed by Town of Bon Accord Council.

Application continues on the other side.



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Why do you want to be involved with the Community Services Advisory Board?

Please attach additional information you feel may be helpful. (I.e.: letter, etc.)

Where did you hear about the Community Services Advisory Board vacancies?

Town of Bon Accord website	Newspaper advertisement Community bulletin/pos	ster
Facebook	Word of mouth	
Other (please specify)		
Applicant's Signature	Date	
Parent/Guardian Signature	Date	
Only required if the applicant is under 18.		

The information collected on this form is authorized under Section 4(c) of the Protection of Privacy Act (POPA). It will be used to process community services advisory board volunteer member applications for the Town of Bon Accord. If you have any questions about the collection and use of the information, contact the Town of Bon Accord at 5025 - 50th Avenue, Bon Accord, AB, TOA 0K0 or by calling (780) 921-3550.