

ATTACHMENT B
VOLUNTEER COMMITTEE MEMBERSHIP FORM
LEISURE VILLAGE ASSOCIATION, INC.

If you are willing to share skills, experience and expertise, please fill out this form and return it to the Association Office.

The Association is looking for homeowners or residents with experience, special skills and expertise for appointments to standing committees

Listed below are the committees available. Please place an "x" in the area of interest and use the space provided to expand upon your qualifications and expertise. If applicable, list credentials, professional designations, certificates or education. Please complete the backside of this application form.

You will be agreeing, if appointed, to give the time necessary to do effective Committee work. The Board of Directors will make this appointment and notification will be sent to you as to the Board's decision.

NOTE: FILL OUT A SEPARATE FORM FOR EACH COMMITTEE YOU WOULD LIKE TO JOIN. YOU MAY SERVE ON A MAXIMUM OF FOUR COMMITTEES.

- | | |
|---|---|
| <input type="checkbox"/> ARCHITECTURAL* | <input type="checkbox"/> INSURANCE* |
| <input type="checkbox"/> BUILDING & GROUNDS* | <input type="checkbox"/> RESEARCH & ADVISORY* |
| <input type="checkbox"/> COMMUNICATIONS* | <input type="checkbox"/> RESIDENTIAL LANDSCAPE* |
| <input type="checkbox"/> EDUCATION & RECREATION* | <input type="checkbox"/> WATER COMMITTEE* |
| <input type="checkbox"/> BINGO (sub of Ed & Rec) | <input type="checkbox"/> WELCOME* |
| <input type="checkbox"/> TRAVEL (sub of Ed & Rec) | |
| <input type="checkbox"/> FINANCE* | |

My qualifications for this Committee are:

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL ADDRESS (IF APPLICABLE) _____

*STANDING COMMITTEES

My experience has been in the following areas: "Check each box that applies"

- | | | |
|---|---|--|
| Accounting/CPA..... <input type="checkbox"/> | Electrical..... <input type="checkbox"/> | Landscaping..... <input type="checkbox"/> |
| Attorney..... <input type="checkbox"/> | Emergency Services..... <input type="checkbox"/> | Painting..... <input type="checkbox"/> |
| Audit..... <input type="checkbox"/> | Engineering..... <input type="checkbox"/> | Personnel..... <input type="checkbox"/> |
| Ballot Tabulator..... <input type="checkbox"/> | Executive Assistant..... <input type="checkbox"/> | Plumbing..... <input type="checkbox"/> |
| Budgeting..... <input type="checkbox"/> | Financial Planning..... <input type="checkbox"/> | Purchasing..... <input type="checkbox"/> |
| TV..... <input type="checkbox"/> | General Contractor..... <input type="checkbox"/> | Roofing/Cement..... <input type="checkbox"/> |
| Carpentry..... <input type="checkbox"/> | Health Services..... <input type="checkbox"/> | Street (Asphalt)..... <input type="checkbox"/> |
| Computers..... <input type="checkbox"/> | Heating/AC..... <input type="checkbox"/> | Writer..... <input type="checkbox"/> |
| Computer Hardware... <input type="checkbox"/> | Insurance..... <input type="checkbox"/> | Other (specify)..... <input type="checkbox"/> |
| Cost Analysis..... <input type="checkbox"/> | Internal Control..... <input type="checkbox"/> | <input type="checkbox"/> |
| Data/Word Processing <input type="checkbox"/> | Inventory Control..... <input type="checkbox"/> | <input type="checkbox"/> |
| Election Supervision.. <input type="checkbox"/> | Investments..... <input type="checkbox"/> | |

SPECIAL SKILLS:

CREDENTIALS AND/OR CERTIFICATES:

COMMITTEE CHAIR'S COMMENTS:

RECOMMEND APPROVAL -

RECOMMEND DISAPPROVAL -

Chairperson's Signature: _____ Date: _____