

or by mail or in person at:

Boards and Committees Member application

Name:			Date:			
Email:			Tel:			
Committee(s)	of interest: (P		,			
☐ Library Board						
	☐ Police Services Board					
			ndards Committ	ee		
		Deddenio				
			•			
☐ Cemetery Committee						
☐ Other:						
Availability: Please indicate	all times when	you would gen	erally be availab	ole for a meetin	q.	
	Monday	Tuesday		Thursday	Friday	
Morning	,	,	,	,	,	
Afternoon						
Evening						
			of interest that c committee; pas	• •	selection process: eriences, etc.)	
Please submit y	our application	by email to:	vdion@tow	nsrf.ca		

Personal information contained on this form is collected under the Municipal Freedom of Information and Protection of Privacy Act and will be used to for committee member selection process. Questions regarding the collection of information should be directed to vdion@townsrf.ca

142, 1st avenue, P.O. Box 249

Smooth Rock Falls, ON POL2BO