CITY OF AUGUSTA
COMMITTEE MEMBERSHIP APPLICATION

___Any committee at Mayor's discretion
___Assessment Review Board
___Cable TV Committee
___Capital Riverfront Improvement District
___Development Commission
___Community Development Advisory Committee
___Community and Social Services Advisors
___Conservation Commission
___Fort Western Trustees
___General Assistance Fair Hearing Authority
___Historic Preservation Commission
___Housing Authority
___International Code Council (formerly BOCA Board of Appeals
___Lithgow Library
___Parking District
___Parks & Recreation Advisory Board
___Planning Board
___Registration Board of Appeals
___Sanitary District
___Tree Board
___Water District
___Zoning Board of Appeals

Name _____

Street address _____

Mailing address _____

Telephone: (home)_____ (work)_____ ext.____ (fax)_____ (cell)_____

Email address_____

Education _____

Occupation _____

List other activities_____

_____

_____

Why do you wish to serve? _____

_____

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COMPLETED APPLICATION MAY BE FAXED to 620-8174 OR RETURNED BY MAIL to City Manager's Office, City of Augusta, 16 Cony Street, Augusta, ME 04330.