

The Town of Green Mountain Falls

P.O. Box 524, 10615 Green Mountain Falls Road, Green Mountain Falls, CO 80819 (719) 684-9414 www.gmfco.us

Committee Volunteer Application

Parks, Recreation & Trails Advisory Committee Planning Commission Name:	_
Address of Primary Residency:	
Alternate Address:	
Alternate Address: Email	ail address:
Are you willing to serve as an alternate? Yes \(\subseteq \) No Each committee can have up to three alternates, whe member's absence, may vote of	o may participate in discussion and, in the event of a
Planning Commission Requirements: Green Mountain requires that Planning Commission Members hold to Mountain Falls Town Limits.	•
Planning Commission Only Applicants for the Planning Commission must subremost of residency may be obtained on the Colorace	do Secretary of State Website
Signature and Acknowledgement: (to be signe	ed before a Notary Public)
Notary Public	

All applicants please proceed to page two.

Please describe your relationship to the commu	unity/Town of Green Mountain Falls:
Current Employer/Occupation:	
Work Experiences that may apply:	
Other Volunteer Experiences that may apply: _	
Any Special Qualifications that may apply to this	s volunteer position:
Other Current Volunteer Positions you hold:	
Reasons for choosing this Volunteer Opportunit	ty:
	that the Town of Green Mountain Falls IS NOT liable for volunteering at any Town facilities or activities.
	ve provided in this application is true to the best of my knowledge.
Signature:	Date:
Parent/Guardian Signature:	Date:
(If unde	er 18)

*Please attach any other relevant information/documentation that would enhance your application.