

PHONE: 540/289-9466 **MASSANUTTEN PROPERTY OWNERS ASSOCIATION, INC** FAX: 540/289406

DATE: _____ E-MAIL: mpoa@massanuttenvillage.com STAMP RECEIVED: _____

APPLICATION FOR BOARD OF DIRECTORS

NAME: _____

OWNERSHIP CATEGORY: _____ FULL _____ PART _____ OTHER (explain) _____

_____ UNIT NO. _____ LOT NO.

PHONE: WORK _____ HOME _____

OCCUPATION: _____ RESUME ATTACHED: _____

E-MAIL: _____

MAILING ADDRESS: _____

WHEN DID YOU BECOME AN OWNER: _____

PLEASE ELABORATE ON YOUR PROFESSIONAL/EDUCATIONAL BACKGROUND:

PLEASE LIST SKILLS WHICH YOU FEEL WOULD BENEFIT THE MPOA:

PLEASE LIST CIVIC AND COMMUNITY ORGANIZATIONS/MPOA COMMITTEES/CLUBS IN WHICH YOU HAVE BEEN INVOLVED OR HELD OFFICE:

EXPLAIN WHY YOU WANT TO JOIN THE BOARD:

THANK YOU FOR YOUR INTEREST. PLEASE RETURN TO MPOA OFFICE.
