

**LEISURETOWNE ASSOCIATION**

**BOARD OF TRUSTEES**

**2024 APPLICATION**

Please consider my application to be elected for to the Board of Trustees for the upcoming 2024 election. By signing below, I certify that I qualify to be a board member pursuant to the Association's governing documents.

Name:

Property Address:

Email:

Primary Telephone:

**Note: This form must be received by the Association (via email, fax, US mail, hand delivery or online). Submissions will be timestamped and printed in order of receipt.**

*Provide a 125 word or less informational biography about yourself and why the Community will benefit from your service on the board (previous experience, etc.). You may submit your biography on a separate sheet of paper or as a word document (preferred).*

Signature

Date

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