

COMMITTEE CHAIR APPLICATION

NAME: WORK PHONE: CELL PHONE: OTHER PHONE: E-MAIL EMPLOYER: BRIEF BIO & EXPERIENCE (RELATED TO COMMITTEE)	
PLEASE MARK WHICH COMMITTEE You are allowed to select more than one, but can only serve as the chair of one committee, so if you select more than one, use the number system to indicate 1 st , 2 nd and/or 3 rd choice.	
Community Segment Community Segment Marketing Membership National Confeguence Programs Publications a Special Events Sponsorships	wards erence nd Communications

SUBMIT COMPLETED FORM TO COMMITTEE LIASON