



CITY OF AMITY

109 Maddox Avenue
P.O. Box 159
Amity, OR 97101

Ph: (503) 835-3711
Fax: (503) 835-3780

TOURISM COMMITTEE APPLICATION FOR APPOINTMENT

Name: _____ **Date:** _____

Business Name: _____

Business Address: _____

City/State/Zip: _____

Telephone No.: _____
Home Work Cell

E-Mail Address: _____

Present Occupation: _____

Home Address: _____

City/State/Zip: _____

Is this address within city limits? _____

Amity Resident: ___ No ___ Yes – since year _____

Are you a registered Voter in the State of Oregon?

1. Employment, professional, and volunteer background:

2. Previous City appointments, offices, or activities:

3. What experience/training/qualifications do you bring to this Committee? You may attach a resume.

4. What specific contributions do you hope to make?

Signature: _____ **Date:** _____

The Tourism Committee meets at such times as the Committee may determine are appropriate and necessary.

For office use only

Please return this form to:

| | |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Date Received: | City of Amity 109 Maddox Avenue P.O. Box 159 Amity Or, 97101 Ph: 503-835-3711 Fax: 503-835-3780 njohnson@ci.amity.or.us |
| Date Considered: | |
| Action by Council: | |
| Term Expires: | |