



AD HOC COMMITTEE

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____ CELL: _____

I am available during the following hours for volunteer assignments and meetings:

Weekdays: _____ Weekends: _____ Mornings: _____ Afternoons: _____ Evenings: _____

I would be interested in chairing a committee: _____ YES _____ NO.

Tell us which committee you are interested in volunteering:

____ Design Guideline Committee

____ Rules and Regulations Committee

Please summarize your special skills and qualifications you have from employment, previous volunteer work, or through other activities, including hobbies and sports.

By submitting this application, I understand that my application must first be approved by the Board of Directors. I understand that I must be a member of the Two Sunset Pointe Homeowners Association, Inc. and be in good standing. I understand that I must hold myself to a business code of conduct, all information that I receive is confidential and must not be shared with other homeowners, and I must represent the HOA in a positive and professional manner.

Signature: _____

Date: _____

Yes, the HOA may share my contact information for official HOA business. _____ Please initial.

The Two Sunset Pointe Homeowners Association, Inc. would like to thank you for volunteering to serve your community.