CLACKAMAS COUNTY FAIR
RODEO ASSOCIATE MEMBERSHIP APPLICATION

Name:_____ Occupation:_____

Home Address:_____
STREET CITY ZIP

Employer:_____ Position:_____

Daytime Phone:_____ Evening Phone:_____

Fax:_____ Email:_____

Two References: _____ _____
NAME PHONE

_____ _____
NAME PHONE

Why does an associate membership interest you?_____

_____

_____

_____

What experience or skills do you have that will assist you in contributing to your membership on the Committee? Re: carpentry, food service, work experience, etc.:_____

_____

_____

_____

List other organizations, boards, committees, or volunteer work that you currently are involved with or have been involved with in the past:_____

_____

What are your interests (activities, hobbies, etc.):_____

_____

Associate Members shall serve at the pleasure of the Rodeo Committee. Associate Members will be reviewed annually. Feel free to attach a copy of your resume and/or use additional sheets as needed.

_____ _____
SIGNATURE DATE

_____

Committee Recommendation:

CamScanner