

Date of Application _____

**Deadline for Application is March 1st.
Drover Application**

Name _____

Current Address _____ Previous Address _____

City/State/Zip _____ City/State/Zip _____

From _____ To _____ From _____ To _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email Address _____

Number of years in the community _____ Birthdate _____

If Married, Full Name of Spouse _____

List Children and their Birthdates

Name of Employer/Business _____

Employer/Business Address _____

Position Held _____

Previous Employer _____

From: _____ To: _____

Number of Years Volunteered before application _____

Community/Agriculture Involvement and/or Leadership Positions
Held _____

Interests/Hobbies _____

Describe why you are interested in becoming a member of the
Association and how you feel the organization would benefit from
you involvement. _____

I understand membership in the Comal County Fair Association is
limited by the constitution and by-laws and applications are accepted
only when vacancies occur. Further, Drover membership is for a
period of one year only and subject to election each year.

If accepted, I am willing and available to work during the fair and
the times and areas of assignment will be determined by the committee
Chairmen and Board of Directors.

Signature of Applicant

Date

Attach Photo Here

Without photo this application will be incomplete and will not be
considered.

Sponsoring Director Statement

Briefly describe your association with the applicant and why you feel they would be an asset to our organization.

I have discussed the requirements and benefits of membership in the Comal County Fair Association with this applicant and recommend this applicant and recommend this individual for consideration.

Signature of Sponsoring Director
(May not be a Sr. Director)

Print Name

Phone Number

*****For
CCFA Office Use Only

_____ Shareholder Number