



City of Pell City Application for Board Membership

Board of Interest: _____

Name: _____

Home Address: _____

Mailing Address: _____

Email Address: _____

Employer: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Do you reside within the City Limits of Pell City? _____

Please provide a little bit of information about yourself and any relative experience associated with the aforementioned board of interest: _____

Date

Applicant Signature

To be completed by the City:	
Date Received: _____	By: _____
Date Approved: _____	By: _____
Term Dates: _____	