

PARK MAINTENANCE AND RECREATION IMPROVEMENT DISTRICT OVERSIGHT COMMITTEE APPLICATION

NAME:	I am at least 18 years of age: ☐ Yes ☐ No
Address of Residence within Assessment District Boundaries:	
Community (mark only one):	
□ Rancho Cordova □ Rosemont □ Larchmo	ont/Riviera East Gold River
Contact Information:	
Mailing Address: ☐ Same as above or:	
Phone Number:	Email Address:
Discuss the reasons you would like to serve on th	is Committee:
Discuss what skills you would bring to the Comn	nittee:
Members are appointed to 4-year terms. I am av	ailable to attend meetings: Daytime Evening
Signature:	Date: