Crooked Creek Heights South
Neighborhood Association

Board of Directors
Self-Nomination Form

Name: _____ Phone: _____
First Last

Email _____

Address: _____

Please provide a brief description for voters on why you would like to serve on the Board of Directors. This form will be included with ballots so voters will get a sense for whom they are voting.

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Return to:
CCHSNA via email crookedcreekheightssouthna@gmail.com