

Board of Directors Candidacy Form

Name:	Date:
Property Address:	
Phone Number:	E-Mail:
	<u>Tell us about yourself!</u>
education, profession	e briefly tell us about yourself, your family, how long you have lived in the community, n, or any interests, hobbies, etc.
Why would you like	e to serve on the Board of Directors?
Do you have any co	mmitments that might prevent you from being able to actively serve on the Board?
	e Association do you feel need the most attention in the coming year?
By submitting this fo	orm, I acknowledge that I accept those responsibilities as described in the Bylaws if elected t the information provided on this questionnaire will be published in the Annual Meeting
Thank	you for your interest in volunteering to serve your community!

Essex Association Management, L.P. 1512 Crescent Drive, Suite 112 Carrollton, TX 75006 Phone: (972) 428-2030 Fax: (469) 342-8205 www.townesofbuckingham.com