

EXPRESSION OF INTEREST ORANGE CITY COUNCIL COMMUNITY COMMITTEE



NAME OF COMMUNITY COMMITTEE	
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Title	First Name	Surname

Email Address (Council's preferred method of distribution)

All business papers will be emailed to members unless a request is made for a paper copy

Address (Postal)

Town	Postcode

Phone (Home)	Phone (Work)	Mobile

INTEREST IN COMMUNITY COMMITTEE

RELEVANT SKILLS AND EXPERIENCE

SIGNED

DATE

PLEASE RETURN FORM TO:

Orange City Council
PO Box 35
ORANGE NSW 2800

council@orange.nsw.gov.au | fax: 6393 8199

RECORDS USE ONLY
