



**Arlington Heights Park Foundation
Application Form
Board of Directors**

Name: _____

Address: _____

City: _____ Zip Code: _____

Best Phone Contact: _____ Secondary Phone Contact: _____

Occupation/Employer: _____ How long? _____

Position/s held: _____

Why are you interested in serving on the Arlington Heights Park Foundation?

What has been your involvement in the Arlington Heights community or other communities?

What knowledge, qualifications, and skills would you bring to the Board of Directors?

Additional Comments:

References (Please list three)

<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
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Signature: _____

Date: _____

Return this application to:

Mike Gordon, Chairman
Arlington Heights Park Foundation
Administration Center
410 N. Arlington Heights Rd.
Arlington Heights, IL 60004

OR

Email to: sscholten@ahpd.org