



TOWN OF SOUTHAMPTON

210 College Highway, Suite 7
Southampton, Massachusetts 01073

APPLICATION TO SERVE ON A TOWN BOARD OR COMMITTEE

Name: _____

Address: _____

Email Address: _____

Home Telephone: _____ Cell Phone: _____

Are you a registered voter of the Town of Southamptton? Yes No

Voter registration confirmation by Town Clerk _____

Board, Committee, or Commission for which you wish to apply (Please list in order of preference, if you are willing to be considered for appointment to more than one committee, or if you wish to serve on a board where there is no present vacancy.)

Please list any education, experience, professional achievement, skills, or special interest you may have that will assist you with the Board or Committee Assignment(s) for which you are applying.

COMMENTS:

SIGNATURE: _____ DATE: _____