

PGA WEST FAIRWAYS ASSOCIATION

REQUEST TO SERVE AS A MASTER ASSOCIATION BOARD MEMBER - 2020

NAME _____ PHONE _____

PGA WEST ADDRESS _____

ADDRESS _____

(If Different Than Above)

Please place my name in nomination as the Fairways Association representative member of the Board of Directors for the PGA WEST Master Association. I have supplied information below that I agree may be published for this volunteer position.

Note: The Board of Directors currently has a Code of Conduct and Ethics policy in place for all Board members. By signing your name below, you agree a) to sign the Code of Conduct policy that is in place, if appointed, and b) to participate in an interview by the Fairways Board of Directors.

(Signature)

I wish to serve as a Board member because _____

Qualifications I feel will benefit the Master Association _____

Goals I feel are important to the Master Association _____

(Please use back of form if you need additional space)

This form must be received by 5:00pm, Wednesday, September 23, 2020. Please also include a one-page biography and headshot photo.

MAIL TO: PGA WEST Fairways Association
Attn: Michelle Reese
P. O. Box 1690
La Quinta, CA 92247

VIA EMAIL: Michelle.Reese@managementtrust.com