# LAUGHLIN TOWN BOARD COMMITTEE APPLICATION

Name of Committee (you would like to serve on):_____

Name:_____

Home Address:_____

Phone:_____E-Mail:_____

Work Address:_____

Phone:_____Cell/Pager_____

Will you be available to serve on a Committee during the day? :
Yes_____No_____Maybe_____

Please provide a brief description of your qualifications, experience, or interests which would be considered an asset to the Laughlin

Town Board Committee on which you wish to serve:_____

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My resume/letter of interest is attached: Yes_____ No_____

I certify that the information provided is true and accurate to the best of my knowledge.

Signature_____ Date_____

You may deliver this application to the Laughlin Town Manager's Office, 101 Civic Way, Laughlin, Nevada or you may mail to:

Laughlin Town Manager's Office
Committee Selection Process
101 Civic Way
Laughlin, NV 89029

NOTE: Please be advised that this document becomes a public record once it is received by Clark County.