

APPLICATION TO TOWNSHIP OF DORION FOR APPOINTMENTS TO

COMMITTEES AND BOARDS

Applicant Name:	
Applicant Address:	
Applicant Phone No.:	
Applicant Email:	
(if more th	TO WHICH YOU ARE SEEKING APPOINTMENT: an one, please list in order of preference)
REASONS FOR SEEKI	NG APPOINTMENT:
	MATION WHICH MAY BE HELPFUL IN CONSIDERATION OF YOUR re space is needed, please attach hereto)
	CANTS MUST BE ELIGIBLE MUNICIPAL ELECTORS IN THE P OF DORION
Please return to:	Mavis Harris Clerk-Treasurer

Dorion, ON POT 1KO

Township of Dorion 170 Dorion Loop Road