

DUE BY JULY 7TH, 2023**Please Print**

Name: _____ Email: _____

Cell #: (____) ____-____ Business #: (____) ____-____ Other: (____) ____-____

Home Address: _____
Street City State ZipMailing Address: _____
(if different from above) Street City State Zip

I am: (Check all that apply)

- ☐ A resident of: ☐ City of Cedartown ☐ Polk County ☐ Outside County: _____
(County Name)
- ☐ Available for monthly board meetings (Schedule to be determined at first meeting)
- ☐ An elected member of government: _____
(Position Held)
- ☐ A downtown property owner (see map)
Property Address: _____
- ☐ A downtown business owner (see map)
Business Address: _____
- ☐ A downtown employee
Business Name: _____ Position: _____

My downtown involvement over the past two years includes: (Check all that apply)

- ☐ Serving on a committee _____
- ☐ Assisting with projects _____
- ☐ Participation in events _____
- ☐ Financial contributions _____

(Additional Space Provided on Back, if Necessary)

Organizations to which I belong and volunteer service include: _____

Interest/Hobbies/Talents/Skills: _____

I wish to serve on the Authority Board because: _____

(Continued on Back)

DUE BY JULY 7TH, 2023

Page 2

Additional Information Provided by Applicant:

I will allow my name to be submitted for consideration in service to the Authority; and if appointed to serve as a member of the Board of Directors, I agree to:

- Attend all possible regular monthly Board meetings, committee meetings and any special meetings
- Attend eight hours of training within my first year of service as required by law
- Attend the Annual Planning Session
- Participate in a Board Orientation within 30 days of appointment
- Enter into full discussion and participation in policy decisions affecting the DDA and its purpose
- Accept responsibility for assignments and offer suggestions on programming and operations
- Maintain matters of confidence
- Serve the Authority, working for its overall well-being and that of the central business district
- Seek opportunities to learn more about downtown revitalization efforts and best practices

At this time, I

- ☐ I am able to serve beginning ____/____/____
- ☐ I am unable to serve, but would like additional information
- ☐ I am not interested in serving on the board, but would like to serve on a committee.

Applicant Signature____/____/____
Date

PLEASE RETURN APPLICATION TO:
OSCAR GUZMAN, CITY OF CEDARTOWN
201 EAST AVENUE CEDARTOWN, GEORGIA 30125