Hickory Meadows Advisory Committee
Application to Become Involved

The seven-member volunteer Hickory Meadows Advisory Committee serves as an advisory committee to The City of Traverse City and Charter Township of Garfield Recreational Authority, helping to guide the development and execution of a management plan for Hickory Meadows Park. *All committee members must be residents of either Garfield Township or the City of Traverse City. Applicants must not be in default to either the City or the Township.* Appointments are for two years and expire June 30. Applications are accepted on an ongoing basis and are kept on file for a period of one year.

Applicant Name:_____

Residential Address:_____
(Street) (City) (State) (Zip)

Email Address:_____

Preferred Phone:_____ Additional Phone:_____

Occupation (if retired, please provide your career):_____

Before submitting your application, please attach a brief letter describing the following:

- Why you are applying for the Hickory Meadows Advisory Committee;
- How you believe your appointment would benefit Hickory Meadows;
- Any involvement in the community on a board/committee or in another volunteer capacity; and
- Any other helpful information relevant to your application.

While it is not required, a resume is also helpful in the recruitment process and can be included.

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YES NO Are you in default to the City or the Township?
If yes, please note applicants in default to the City or Township are not eligible for consideration.

YES NO Do you or immediate family members currently serve on a City or Township board or committee?
If yes, which board or committee?_____

YES NO Are you or immediate family members currently employed by the City or Township?
If yes, how so?_____

YES NO Did you attach the required letter outlining the items requested above?

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The applicant acknowledges that the Recreational Authority may be required from time to time to release records in its possession. The applicant hereby gives permission to the Recreational Authority to release any records or materials received by the Authority from the applicant as it may be requested to do so as permitted by the Freedom of Information Act, MCL 15.231 et seq.

_____ _____
Signature Date

Please return your application, letter, and optional resume to Matt Cowall, Executive Director, Recreational Authority, 324 Munson Avenue, Traverse City, MI 49686, or to mcowall@liaa.org. If you have any questions, please feel free to contact the office at (231) 929-3696. Thank you for your interest!