



South Bay Community Center Application for Board Membership

NAME _____
CITY _____ ZIP _____
PHONE (H) _____ (W) _____ (C) _____
E-MAIL _____ BEST TIME TO CONTACT _____

I AM INTERESTED IN PARTICIPATING ON THE SOUTH BAY COMMUNITY CENTER BOARD
FOR THE FOLLOWING REASONS: _____

SHARE ANY EXPERIENCE YOU MAY HAVE AS IT RELATES TO THE SBCC BOARD:

Upon acceptance, each member shall attend two meetings in a monitoring probationary status, and upon a majority vote by the Directors, shall become a full member at their third meeting. Position will be a Community-at-Large Director, per our bylaws.

THE SOUTH BAY COMMUNITY CENTER BOARD MEETS MONDAYS AT 6 P.M. UNLESS OTHERWISE NOTED. MEETINGS ARE LISTED ON THE MASTER CALENDAR. CALL NUMBER BELOW FOR FURTHER INFORMATION

SIGNATURE _____ DATE _____

Please Return to: South Bay Community Center
2180 Palisades Ave., Los Osos, CA 93402. For
more information, call 805-528-4169 or email
sbcc@sbcommunitycenter.net

Approved: _____ Term of Office: _____