

Air Quality Steering Committee APPLICATION



Name: _____

Address: _____ Zip Code: _____

Email: _____ Phone Number: _____

Community Affiliation

How are you affiliated with the South Sacramento – Florin community?

Live here Work here Own a business

Other, please specify _____

If you own a business, please provide the name and street address:

Select one or more of the types of organizations you are seeking to represent in the South Sacramento – Florin community:

- | | | |
|---|---|--|
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> School | <input type="checkbox"/> Resident/General public |
| <input type="checkbox"/> Elderly care | <input type="checkbox"/> Local government | <input type="checkbox"/> Community organization |
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Environmental group | |
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Local business or industry | |

Why do you want to serve on the Air Quality Steering Committee and what are your air quality concerns in the South Sacramento – Florin community?

How did you hear about this Air Quality Steering Committee?

Disclaimer and Signature

I understand that my volunteer application may or may not be approved by the Sac Metro Air District. If approved, any false or misleading information in my application may result in my release as a member of the Air Quality Steering Committee.

Signature _____ Date _____