

KEYSTONE AGRICULTURAL & RECREATIONAL CENTRE INC.
Administrative Procedure

Date Adopted: (D/M/Y)	Title: Board Governance
Motion:	Section: A
	Code:

CANDIDATE'S SUBMISSION FORM
for
Keystone Centre Board of Director Position

Name _____

Home Address _____

Business Address _____

City _____ **Province** _____

Home Phone _____ **Business Phone** _____

E-Mail _____

Occupation _____

Reason for interest in Board Position _____

Community Involvement i.e., organizations/associations:

Current _____ **Past** _____

_____	_____
_____	_____
_____	_____

General Information (optional):

(Please provide any information regarding yourself that you feel would be pertinent to the role of director)

i.e., hobbies/family _____

