



Health and Wellness Advisory Committee

Volunteer Application Form

Thank you for your interest in the Health and Wellness Advisory Committee of the Village of Queen Charlotte.

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Email: _____ Occupation: _____

We welcome your involvement in the Committee. Can you tell us about yourself by filling out the questionnaire?

Describe your reasons for wanting to be a member of the Health and Wellness Advisory Committee:

What experience and skills can you bring to this committee?

Signature

Date