



# City of Whitehorse Trails & Greenways Committee

## Nomination Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Association Represented: \_\_\_\_\_

What skills and goals will you bring to the Trails & Greenways Committee?

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Relevant background / qualifications?

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Community / volunteer experience in the past five years?

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**Consent** I consent to the release of the information on this nomination and understand that it will be made available on an as needed basis to City of Whitehorse Council members, civic staff and any applicable civic agencies for the purpose of making appointments to the Trails & Greenways Committee, and, if I am appointed, for contacting me regarding meetings and sending information.

Signature of Nominee: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Association President: \_\_\_\_\_

Date: \_\_\_\_\_