



Application for Appointment to the Downtown Advisory Committee

Please return to the office of the Town Clerk at 16 S. Main Street
eward@waynesvillenc.gov; (828) 452-2491

Additional pages and/or a resume may be attached but is not required

NAME _____

STREET ADDRESS _____

MAILING ADDRESS _____

PHONE _____

EMAIL _____

The Advisory Committee is comprised of 13 members: 4 members from Downtown Merchants, 4 members from Downtown Owner/Residents, 3 at-large members, 1 County Official, and 1 Town Board Member. Please indicate your representative area:

- Downtown Owner/ Resident Downtown Merchant At-large

Members of the Advisory Committee will serve as members of 4 standing committees and serve staggered terms. Please indicate below your choice of committee in ranking order of your preference.

- _____ Economic Vitality Committee
- _____ Mainstreet Design Committee
- _____ Effective Promotions Committee
- _____ Sustainable Organization Committee (budget, annual work plan, organization goals & objectives)

I am interested in serving on the Downtown Advisory Committee because: _____

I have experience/expertise in the following areas and/or have served on the following Boards or Commissions: _____

I believe that I can contribute the following to the Downtown Advisory Committee: _____

Tell us about yourself and your background: _____

If I am chosen for appointment, I will be contacted for my permission to accept the appointment. If I am chosen, I will faithfully execute my duty on the Downtown Advisory Committee.

Signature _____ Date _____