

ADDISON PARK DISTRICT



Leisure for your lifestyle.

CITIZEN ADVISORY PANEL

Application Questionnaire

Name: _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

What zone do you like in? (Please refer to the map of zones) _____

(All answers are limited to a maximum length of 300 characters.)

1. Why are you interested in serving as a Citizen Advisory Panel (CAP) Representative for the Addison Park District?

2. Have you ever served as an employee or Park Board Member for the Addison Park District? If so, please list role and dates.

3. Are there any particular issues or opportunities that influenced your decision to become a CAP Representative?

4. What involvement have you, or your family members had with the Addison Park District programs and/or facilities?

5. How often do you, or your family members frequent Addison Park District parks? Which ones?

6. What involvement have you, or your family members had with other local taxing body entities (school districts, Township, Village, etc) and or local civic groups (Kiwanis Club, Shriners, Scout Troops, etc.)

7. What contributions (knowledge, skills, experience, etc.) do you feel you can bring to the panel and offer to the Park District?

8. How did you learn about this opportunity?