

CEMETERY BOARD OF DIRECTORS APPLICATION FORM

PLEASE COMPLETE THE APPLICATION FORM AND MAIL OR EMAIL TO

**RESURRECTION COMMUNITY CEMETERY
2643 KINGS ROAD
SYDNEY FORKS, NS B1L 1A1**

EMAIL: medcomcemetery@gmail.com

Name of Lot Owner _____

Address _____ Apt. _____

City _____ Prov. _____ Postal Code _____

Telephone (902) _____ (H) 902) _____(C)

What position are you applying for?

Chairperson (3- Year Term) _____

Director: 1 - Year Term _____ 2 - Year Term _____ 3 - Year Term _____

Have you ever served on previous boards at this cemetery? Yes _____ No _____

If yes, what year (s) did you serve?

To be eligible to serve the cemetery board of directors you must be a lot owner and agree to be interviewed by the cemetery board before your application is accepted for election. If elected by the membership to serve on the board of directors you must sign an Oath of Office, a Confidentiality Agreement, and attend an orientation workshop before serving the council and other scheduled workshops throughout your term.

Do you agree to these terms? Yes _____ No _____

Briefly share with us why you intend to serve the cemetery board of directors and what strengths and attributes do you possess to be a viable person serving the cemetery board.

Signature _____ Date _____