



## Neighborhood Revitalization Strategy Steering Committee Application

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

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of years lived in Wheat Ridge: \_\_\_\_\_ Gender:  Male  Female

I live in Council District:

District I                      District II                       District III                       District IV

Select all that apply, I am a:

Homeowner                       Renter                       Business Owner                       Rental Property Owner

Do you belong to or participate in any City/community organizations?

\_\_\_\_\_  
\_\_\_\_\_

Why do you want to serve on the Committee?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you believe are the top three City priorities?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attendance is required from 4 - 7 p.m. on Wednesday, July 18, 2018, AND Wednesday, September 5, 2018, for critical meetings. Please indicate you are available on both dates.  July 18  September 5

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date