

HCL Committee Application

Name: _____ Age _____ Grade _____

Email: _____ Phone #: _____

Select which committee you are wanting to be a member of:

____ Events ____ Herd Management ____ Farm ____ Chores

Why do you want to serve on this committee?

How would the committee benefit from your involvement?

What goals do you want to accomplish by being on a committee?

Being on a committee is a commitment, we advise that you only fill out this application if you are willing to fulfill all of your responsibilities. By signing below you are acknowledging the time and attendance being asked.

X _____ Date _____

