

**Resume for Elected Office
Leisure Lake Membership Association, Inc.**

Name: _____

Years as a member: _____

Office of Interest: _____

List previous committee(s) and/or Position(s) held: _____

How will the membership benefit from you holding this office? _____

I have read and fully understand the requirements and responsibilities of said office.

Signature: _____ Date: _____

Signatures of two (2) members in good standing are required before submitting resume to

The Board of Directors

Sponsor #1 _____

Sponsor #2 _____