

INTERIM ACCCA BOARD CANDIDATE DECLARATION FORM

Return Interim ACCCA Board Candidate Declaration Form to:

Anthem Country Club Community Association, Inc.
3701 W. Anthem Way, Suite #201, Anthem, AZ 85086
FAX: 623-742-6170 or email: staff@acccahoa.com
Phone: 623-742-6030

Please consider my application for the open seat on the ACCCA Board with a term ending April 2019.

Name (Print): _____

Address: _____

(Check preferred mode of contact.)

Daytime Telephone No. _____

Evening Telephone No. _____

Cellular Telephone No. _____

E-mail Address: _____

_____ I understand I am required to attend the monthly Board Administrative Sessions and the Quarterly Board meetings and complete the necessary preparation for each meeting as needed. If I am unable to attend the Administrative meetings in person, I will participate by conference call.

_____ I understand this term ends April 2019. I understand to retain the interim seat, I will be required to run for this seat in the 2019 ACCCA elections.

The ACCCA Election Committee at the ACCCA office must receive this form no later than April 6, 2018, 5 p.m. You must have your photo taken at the ACCCA office before 5 p.m., April 6. Candidates will be interviewed at a Special Administrative Meeting to be held on April 12th. The new director will be seated with the newly elected Board directors at the April 26 Board meeting at 6:30 pm. You will be required to attend this meeting.

Please provide a few sentences about why you feel you would be a benefit to the community by serving on one of the Boards and list your qualifications in bullet form for a **total of 150 words or less**. The information you provide will be shared with the Anthem Country Club community homeowners. In a typed response on a separate piece of paper, answer the following questions.

1. What is your reason for running?
2. What qualifications do you hold for this seat? (Bullet format preferred).

Remember, the TOTAL word count noting your reason for running AND your qualification is 150 words or less. No exceptions.

By signing below, I certify that I meet the qualifications for office as noted in this information packet.

Signature (Required)

Date