

**LAKE COUNTY COMMISSION
ON CHILDREN & FAMILIES
P.O. Box 346, 87127 Christmas Valley Hwy.
Christmas Valley, OR 97641
541-576-2115 ex 24**

MEMBERSHIP APPLICATION

DATE _____

NAME _____

ADDRESS _____

HOME PHONE _____ **WORK PHONE** _____

OCCUPATION _____

EMAIL ADDRESS _____

Why are you interested in becoming a member of the Commission on Children & Families? What are you hoping might be accomplished through your participation?

**Do you earn more than half your salary from delivering a service to children and/or youth?
(This determines lay versus professional status) Yes _____ No _____**

In what capacities have you dealt with children and youth issues?

In what organizations or boards have you been a member? (Do not limit to just those oriented to children/youth/families.)

What are the children/youth/family issues with which you are most concerned?

Do you feel that you have an idea of the purpose of the Commission on Children & Families, and the requirements of membership?

What other information can you supply that would be helpful to the membership committee in knowing you better?