



PARK COMMITTEE MEMBERSHIP FORM

Park Committee					
Name	Title		First Name		
	Surname				
Address					
Phone	Home		Mobile		
Email					
Type of Membership <small>(please tick)</small>	<input type="checkbox"/> Local Resident				
	<input type="checkbox"/> Sports Club / Organisation	Name			
	<input type="checkbox"/> Community Group	Name			
Position held in this club / organization / group <small>E.g., Treasurer / Member</small>					
What are the reasons for wishing to be a park committee member at this park/reserve?					
Outline your background/experience that you will bring to the park committee <small>(Please feel free to attach additional information)</small>					
Signature				Date	/ /

Please return to: openspace@cityofparramatta.nsw.gov.au
OR Parks and Open Space, Parramatta City Council, PO Box 32, Parramatta NSW 2124