CROOK COUNTY FAIR BOARD

APPLICATION FOR COMMITTEE APPOINTMENT

(Please type or print)

NAME:_____ DATE:_____
Last First Middle

MAILING ADDRESS:_____
Include City, State, and Zip

PHYSICAL ADDRESS (if different from above) : _____

HOME TELEPHONE:_____ ALTERNATE PHONE:_____

EMAIL ADDRESS:_____

COUNTY RESIDENT SINCE:_____
HAVE YOU SERVED ON THIS BOARD BEFORE AND, IF YES, HOW MANY YEARS:_____

PLEASE CHECK WHICH COMMITTEE YOU ARE APPLYING FOR:

☐ Youth Livestock Committee

☐ Awards Committee

☐ Sale Committee

☐ Entertainment Committee

EXPERIENCE/QUALIFICATIONS FOR SERVING ON THE COMMITTEE

_____
_____
_____
_____
_____
_____

SPECIAL INTERESTS/CIVIC GROUPS/VOLUNTEER ACTIVITIES

_____
_____
_____
_____
_____

COMMITTEE MEMBER REQUIREMENTS AS ESTABLISHED BY THE CROOK COUNTY FAIR BOARD

1. Attended and participate in every meeting unless excused by the committee in their minutes.
2. Follow and obey the constitution and by-laws that govern the committee you are appointed.
3. A vacancy will exist at the end of your term. A new application must be submitted for re-appointments and new appointments.
4. Serve in such a way as to represent all of the residents of Crook County.
5. Upon receipt of a letter from a committee that a member has missed 3 consecutive meetings, over half the meetings or with 3 unexcused absences in any 12-month period, the Crook County Fair Board will declare a vacancy and advertise for a new committee member.
6. I understand that I may also be removed for any criminal charge or for cause by the Crook County Fair Board.
7. I authorize the Crook County Fair Board to do a background search and criminal history before or after I am appointed.
8. To read and abide by the written policies and rules of the Fair Board.

I have read and understand the requirements to be a Crook County Fair Committee Member. I understand this application will be active for a period of one year in case a vacancy occurs during yearly advertising. After that time period and I wish to be considered for an appointment, I must submit a new application.

I do hereby certify, swear, and affirm under penalty of perjury, that the information included herein is correct and just in all respects.

SIGNATURE: _____ DATE: _____

MAIL OR DELIVER COMPLETED APPLICATION TO:

CROOK COUNTY FAIR BOARD
PO BOX 473
1110 FAIRGROUNDS LOOP ROAD
SUNDANCE WY, 82729
PHONE: 307-283-2644
EMAIL: crookcofair@rangeweb.net