



HARBOROUGH TOWN COMMUNITY TRUST
APPLICATION FORM

ELECTION TO BOARD OF TRUSTEES

Name of Applicant: _____
Organisation and Position: _____
Address: _____

Tel No: _____
Email: _____

Skills & Experience

Please give details below of your skills & experience and indicate why you wish to be a Trustee (No more than 200 words.)





HARBOROUGH TOWN COMMUNITY TRUST

First Proposer: _____
Position: _____
Organisation: _____
Tel No: _____
Email: _____
Signed: _____
Date: _____

Second Proposer: _____
Position: _____
Organisation: _____
Tel No: _____
Email: _____
Signed: _____
Date: _____

Please return to:

Chairman – Board of Trust
Harborough Town Community Football Ground
Northampton Road
Market Harborough
Leicestershire
LE16 9HF

**Please note that this nomination will be invalid
unless this form has been fully completed.**