



LARP FOUNDATION TRUSTEE APPLICATION

Please answer all questions and place N/A in those areas that do not apply. Please return your signed application to the LARP Foundation at PO Box 3403 Livermore CA 94551. All successful applicants are required to be fingerprinted.

Name: _____
Last First

Phone: _____
Daytime Evening

Address: _____
Street Zip

Email: _____

List current occupation and related employment history:

Describe your current and past involvement in community activities, volunteer and civic organizations:

What particular area of responsibility of this Foundation Board interests you?

Briefly explain your interest in serving as a trustee for the LARP Foundation:

I have attached optional additional materials (such as a resume, etc.) Yes No

Signature

Date