

## PERMISSION TO APPLY

## APPLICATION FOR THE POSITION OF STUDENT MEMBER OF THE HARPER'S CHOICE COMMUNITY ASSOCIATION BOARD OF DIRECTORS

Student's Name:	
School:	
I have read the attached letter to parents or guardians and the other included materials. I understand and accept the responsibilities that my child,, will assume if they are appointed to the position of Student Member of the Harper's Choice Community Association Board of Directors. I give my permission for my child to apply to be considered for this position and to serve in that capacity if appointed.	
If you have any questions, please feel free to c Ingley, at <a href="mailto:manager@harperschoice.org">manager@harperschoice.org</a> or 410-	ontact Harper's Choice Village Manager, Steve 730-0770.
Date	
Parent's/Guardian's Signature	
Parent's/Guardian's Printed Name	