

**EUHARLEE HISTORIC PRESERVATION COMMISSION  
MEMBERSHIP APPLICATION**

**Name:** \_\_\_\_\_ **Date:** /\_\_/2022

**Address:**

**City:** Euharlee **State:** Georgia **Zip:**

**Home Phone:** \_\_\_\_\_ **Cell Phone:**

**Email Address:**

**Civic and Related Experience:**

---

---

---

---

**Please state why you would be a good candidate:**

---

---

---

**What issues within the Historic Preservation Commission's Authority do you feel are the most important to address in the next twelve months?**

**Signature:**