

## Application for 2012 Participation

**Our Vision:** TMACOG will be the governmental partner of choice to coordinate regional assets, opportunities, and challenges.

Name:			Home Phone:	
Occupation:			Jurisdiction/	
Address:			Organization: City/State/Zip:	
Business Phone:	Fax:		E-mail:	
(Please indicate the areas of interest and expertise that you are willing to share – you may be contacted by a TMACOG staff member to further discuss your interest and availability.)				
☐ Transporta	ation Planning	☐ Environmen	tal Planning	☐ Land Use Planning
☐ Communic	nications/PR and Marketing		gal/HR	
I am an elected official and wish to be considered for:  TMACOG Chair TMACOG Vice Chair TMACOG Second Vice Chair				
If elected from my caucus I will serve on TMACOG Board of Trustees:				
Council(s) and committee(s) on which I wish to serve. (See next page for a complete listing of all TMACOG councils and committees.):				
Comments and suggestions:				
Applicant's Name			Date	

SUBMIT FORM