



False Creek Community Association Board of Directors Nomination Form

Name: _____

Home Address: _____

Phone Number(s) _____

Email: _____

Expression of Interest

Please briefly describe your reasons for wanting to serve on the False Creek Community Association Board of Directors, your skills and qualifications, and how and what you would like to contribute:

Signature: _____ Date: _____

Please complete this form by **Monday May 6th at 5:00pm**. Drop your completed form off at the front desk or email to fccavancouver@gmail.com