

# Maremma Sheepdog Club



## of America



Mail from to:  
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### Maremma Sheepdog Club of America

Committee Volunteer Form

#### Your Information

Name: \_\_\_\_\_  
First Last

Email: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_

#### Membership Type

*Volunteers must be current Full or Associate members of the MSCA.*

- Individual Full Member
- Associate Member

#### Choice of Committee(s)

Previous or current MSCA Committee involvement? Yes No

If yes, which one(s) and what years? \_\_\_\_\_

#### Which Committee(s) are you interested in?

- Fundraising
- Newsletter
- History
- Rescue
- Education
- Health
- Nominating

Why are you interested in volunteering for the above committee(s)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special knowledge or experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*For more information, please use back of form*

Are you interested in being a Committee Chair?

- Yes
- No
- Maybe, I need more information

Signature: \_\_\_\_\_

Date: \_\_\_\_\_