

Osprey Run Homeowners Association

Application / Request for Committee Seat

Date: _____

Name: _____

Address: _____ Phone: _____

_____ Alt. Phone: _____

Which Committee would you like to participate in?:

Architectural Community Spirit Other: _____

Based on your choice above, what would you consider to be your best asset to serve on this committee?

If you were chosen to serve on this committee, what do you feel are the most important aspects of this committee?

If selected, how much time monthly, are you willing to dedicate to this committee?

1-2 hours 3-5 hours 6-10 hours 10-15 hours Greater than 15 hours

DO NOT WRITE BELOW THIS LINE - HOA USE ONLY

NOTES: _____

HOA Secretary/ Treasurer
Signature of Approval

HOA Vice President
Signature of Approval

HOA President
Signature of Approval

PLEASE MAIL TO:
Osprey Run HOA, Inc. - Arch. Control Comm.
c/o Sentry Management, Inc.
25400 US 19 N, Ste. 164
Clearwater, FL 33763