



# Delegate Candidate Form

NAME: _____	DELEGATE DISTRICT: _____
ADDRESS: _____	
PHONE: _____	DATE HOME WAS PURCHASED: _____
EMAIL: _____	

Summarize your background and community involvement. What, if any, qualifications do you possess that might be an asset to HRCA?

Briefly state your reasons for wanting to be a District Delegate for the HRCA.

Do you or anyone in your household use the HRCA facilities or participate in HRCA programs? If so, please elaborate.

Do you attend HRCA Events? If so, please explain your favorites and why.

What do you like most about living in Highlands Ranch?

Please answer the following questions:

- Will you have the time required to fulfill the duties of this position?  
(Community Declaration, Section 4.6-4.7, Bylaws Section 5.1-6.15)      YES       NO
- Are you able to attend the necessary monthly meetings?      YES       NO
- Do you object to your phone number/address being available to residents?      YES       NO