

**CATAWBA-WATEREE HABITAT ENHANCEMENT PROGRAM  
LAKES ADVISORY COMMITTEE  
MEMBERSHIP APPLICATION FORM**

*A Cooperative Project of:*



Incomplete applications will be returned to applicant.

**APPLICANT INFORMATION**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

What reservoir / watershed would you represent? \_\_\_\_\_

What are **your** primary uses of the reservoir? \_\_\_\_\_

Are you a member of any environmental organizations? \_\_\_\_\_ If yes, please list. \_\_\_\_\_

What is your educational / volunteer background relative to fish and wildlife issues? \_\_\_\_\_

What interests do you have in habitat enhancement? \_\_\_\_\_

Have you participated in other habitat enhancement programs in the past? \_\_\_\_\_

What programs? \_\_\_\_\_

Would your schedule allow you to meet two to three times per year to support this program? \_\_\_\_\_. Please note that this committee appointment is completely voluntary, so there will be no reimbursement of out-of-pocket expenses (meals, mileage, etc.).

I certify that the above information is true and accurate. I also acknowledge that I have read the Habitat Enhancement Program Charter and have a good basic understanding of the Committee's functions.

Name \_\_\_\_\_ Date \_\_\_\_\_