

**INFORMATION QUESTIONNAIRE/INTEREST PROFILE**

**Account # (found on Newscaster address label)** \_\_\_\_\_ **Date** \_\_\_\_\_

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

**Homeowner Name:** \_\_\_\_\_

**Name of Spouse:** \_\_\_\_\_

**Primary Phone:** \_\_\_\_\_ **Secondary Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Indicate, in numeral order, committees which you would volunteer to serve. Committee responsibilities are listed on back of page.**

	YOUR PREFERENCE	PREFERENCE OF SPOUSE
Architectural Control/Deed Restriction	_____	_____
Beautification Committee	_____	_____
Budget/Financial Planning	_____	_____
Community/Government Relations	_____	_____
Health/Mosquito Control Committee	_____	_____
Patrol/Safety Committee	_____	_____
Personnel/Nominations Committee	_____	_____
Publication/Newsletter Committee	_____	_____
Social Committee	_____	_____
Telephone Committee	_____	_____
Welcome Committee	_____	_____
Would you agree, if asked, to be nominated to serve as a Director? (Yes or No.)	_____	_____
If not now, maybe a future possibility?	_____	_____

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**Your signature** \_\_\_\_\_

**Signature of spouse** \_\_\_\_\_

**Please return this form to the SSCA office in the envelope provided.**

**Thank You!**