

**TALEGA MAINTENANCE CORPORATION
DELEGATE & ALTERNATE DELEGATE INTEREST FORM
FOR _____ NEIGHBORHOOD**

Name: _____ Address: _____

Home Phone: _____ Cell/Phone _____

Email: _____

Are you a resident living in Talega? Yes No

If yes, for how long have you lived in Talega? _____

Are you listed on title for a property in Talega? Yes No

Are you available to attend the Delegate Meetings 3 to 5 times per year? Yes No

Reasons you are interested in serving as a Delegate or Alternate Delegate to the Talega Maintenance Corporation:

List the qualifications that you feel make you a good Delegate/Alternate Delegate to serve on behalf of the Talega Maintenance Corporation:

Delegate District #: _____