

**TOWN OF KENNEBUNKPORT**  
**Application for Boards, Committees & Commissions**

**To the Town Manager: I hereby request to be considered for membership to the following board(s) and/or committee(s):**

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| <input type="checkbox"/> Administrative Code Committee         | <input type="checkbox"/> Kennebunk River Committee        |
| <input type="checkbox"/> Beach Advisory Committee              | <input type="checkbox"/> Lighting Committee               |
| <input type="checkbox"/> Board of Assessment Review            | <input type="checkbox"/> Parsons Way                      |
| <input type="checkbox"/> Budget Board                          | <input type="checkbox"/> Planning Board                   |
| <input type="checkbox"/> Cape Porpoise Pier Advisory Committee | <input type="checkbox"/> Sewer Advisory Committee         |
| <input type="checkbox"/> Cemetery Committee                    | <input type="checkbox"/> Shade Tree Committee             |
| <input type="checkbox"/> Climate Resiliency Committee          | <input type="checkbox"/> Shellfish Conservation Committee |
| <input type="checkbox"/> Conservation Commission               | <input type="checkbox"/> Solid Waste Committee            |
| <input type="checkbox"/> Government Wharf Committee            | <input type="checkbox"/> Zoning Board of Appeals          |
| <input type="checkbox"/> Growth Planning Committee             | <input type="checkbox"/> Wastewater Advisory Committee    |

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Preliminary Information**

Full Name (Print): \_\_\_\_\_

Email Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

*(Please see page 2 for more questions)*

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**Are you registered to vote in Kennebunkport?**

- Yes
- No

**Please list Membership in community organizations, dates involved, and activities performed:**

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**What is your reason for wanting to serve on this board or committee?**

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**What do you feel you can contribute to this board or committee?**

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**Do you have any skills, experience, or training in your background that pertain to the board or committee?**

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**List the top 3 choices you would like to serve on (1. 2. 3. in desired order):**

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Please return the completed application to the Town Manager, 6 Elm St., P.O. Box 566, Kennebunkport, ME 04046, or via email to Laurie Smith at [lsmith@kennebunkportme.gov](mailto:lsmith@kennebunkportme.gov)