

CABELL COUNTY FAIR BOARD, INC.
MEMBERSHIP APPLICATION

TYPE OF MEMBERSHIP ___ Life ___ Annual = September 1, ___ -August 31, ___

NAME: (PRINT) _____

For official use only

ADDRESS: _____

Date Paid _____

HOME PHONE: _____ ALTERNATE PHONE: _____

Amount \$ _____

RESIDENT OF CABELL COUNTY? YES ___ NO ___

Rec'd by _____

BUSINESS OWNER IN CABELL COUNTY? YES ___ NO ___

OVER THE AGE OF 18? YES ___ NO ___

WOULD YOU BE WILLING TO SERVE ON A COMMITTEE? YES ___ NO ___

WOULD YOU BE WILLING TO CHAIR A COMMITTEE? YES ___ NO ___

IN WHAT AREAS WOULD YOU LIKE TO WORK? _____

LIST SOME IDEAS OR SUGGESTIONS THAT YOU MIGHT HAVE:

SIGNATURE:

ACCORDING TO CONSTITUTION AND BY-LAWS OF THE CABELL COUNTY FAIR BOARD, INC:

ARTICLE II, MEMBERSHIP

Membership shall be open to any resident or business owner of Cabell County who is at least 18 years of age. Membership may be obtained by making application for membership to the membership committee. On recommendation of the membership committee and approval of the Board of Directors, the applicant may, upon payment of membership dues, become a member in good standing. Membership year shall run September 1 to August 31.

