

Bountiful Trails Advisory Committee

Application of Interest



Name: _____

Address: _____

Phone: _____ Email: _____

Are you at least 18 years old? Yes No

Have you served on a board or commission before? Yes No

If yes, provide your role(s)

What is your background with trail usage? (mark all that apply)

- | | | |
|------------------------------------------|----------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Hiking | <input type="checkbox"/> Trail Running | <input type="checkbox"/> Grant Writing/Finance |
| <input type="checkbox"/> Mountain Biking | <input type="checkbox"/> Equestrian | <input type="checkbox"/> Backpacking |
| <input type="checkbox"/> Wayfinding | <input type="checkbox"/> Trail Construction/Design | <input type="checkbox"/> Other _____ |

How many hours on average per week do you spend on the above activities? _____

What is your primary method of trail use (hiking, running, biking, motorcycle, etc) _____

Why would you like to volunteer to serve on the Bountiful Trails Advisory Committee?

What aspect of the Committee interests you most and what role would you like to have as a member of the Committee?

****Attendance – The Trails Advisory Committee will meet on a regular basis and will meet at other times throughout the year for trail construction, service and maintenance projects.**

APPLICATIONS MUST BE TURNED IN TO INFO@BOUNTIFUL.GOV BY

MAY 31ST TO BE CONSIDERED