

**CITY OF ROCKDALE
TOURISM COMMITTEE
APPLICATION**



Name: _____

Home Address: _____

Mailing Address: _____ E-mail address: _____

Home Phone Number: _____ Cell Phone Number: _____

Occupation: (if retired list former occupation) _____

Number of years as a Rockdale resident: _____ City Limits? Yes () No ()

Previous experience on boards, commissions, or other civic organizations:

Board or Organization	City, State	Dates	Your Role

Please describe any special knowledge, qualifications or expertise that relates to your possible appointment:

Please give a brief statement why you would like to be appointed to the Tourism Committee:

The City prefers (but does not require) members to be from one or more of the following sectors. Please indicate if any of the following apply to you (check all that apply):

- _____ Owner or manager of a lodging establishment
- _____ Member of an event/organization funded with hotel occupancy tax funds in previous years
- _____ Citizen at-large
- _____ Board member or manager of the Rockdale Municipal Development District
- _____ Owner or manager of a restaurant establishment with a Rockdale address
- _____ Owner or manager of a business with a Rockdale address
- _____ Chamber of Commerce representative

Are you committed to attending all regularly scheduled meetings? Yes No

Are you willing to attend annual training for this appointment? Yes No

Note: While there is no guarantee of an appointment, all applications will be considered equally. Applications will be kept on file for two years. Applications may be updated or withdrawn by the applicant during that time period.

Applicants Signature: _____ **Date:** _____

*Please complete and return to Terry Blanchard, City Secretary
 505 West Cameron Avenue – Post Office Box 586, Rockdale, Texas 76567
 Fax (512) 446-6258 or E-Mail: tblanchard@rockdalecityhall.com*