



FORT COLLINS AREA  
**CHAMBER**  
OF COMMERCE

## 2019 Northern Colorado Legislative Alliance (NCLA) Application

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Company & Title: \_\_\_\_\_

Company Address & Zip: \_\_\_\_\_

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

1. **Work experience:**
2. **Volunteer work:**
3. **Why do you want to be a member of the NCLA?**
4. **List any abilities, skills, licenses, certificates, specialized training, or interests you have which are applicable to this committee:**
5. **Please list any activities which might create a serious conflict of interest if you should be appointed to this committee:**

All applications are subject to an interview and final approval by the Chamber Board of Directors.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Email your application by November 30 to:**  
Fort Collins Chamber of Commerce  
Email: [ahutchison@fcchamber.org](mailto:ahutchison@fcchamber.org)  
Questions? Contact Ann Hutchison at 482-3746