



WINDERMERE & BOWNESS TOWN COUNCIL

Representing the interests of the communities of Windermere, Bowness and Troutbeck Bridge

APPLICATION FOR CO-OPTION AS A TOWN COUNCILLOR FOR _____ WARD

CANDIDATES NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

ELECTORAL ROLL NUMBER: _____

SUPPORTERS (TWO REQUIRED):

(Supporters must be from the Ward you wish to represent and from two different addresses)

1. NAME: _____

ADDRESS: _____

ELECTORAL ROLL NUMBER: _____

SIGNATURE: _____

2. NAME: _____

ADDRESS: _____

ELECTORAL ROLL NUMBER: _____

SIGNATURE: _____

3. WHY DO YOU WISH TO SERVE ON THE TOWN COUNCIL?



WINDERMERE & BOWNESS TOWN COUNCIL

Representing the interests of the communities of Windermere, Bowness and Troutbeck Bridge

4. PLEASE GIVE ANY FURTHER INFORMATION ABOUT YOURSELF THAT YOU THINK MIGHT BE HELPFUL TO THE TOWN COUNCIL WHEN CONSIDERING YOUR APPLICATION. FOR EXAMPLE, HOW LONG HAVE YOU LIVED HERE, WHAT DO YOU DO, OR IF RETIRED, WHAT DID YOU DO, WHAT LOCAL (OR OTHER) ORGANISATIONS (e.g CHARITIES) ARE YOU INVOLVED WITH

SIGNATURE: _____ DATE: _____

To ensure that you qualify to become a member of the Town Council, Questions 1 and 2 on the application form are obligatory.

You are warmly invited to attend a Town Council meeting prior to your application being considered. We meet on the second Wednesday of each month and the planning sub-committee is on the fourth Wednesday of each month.

Electoral roll numbers for yourself and supporters can be obtained from the Clerk.

PLEASE RETURN YOUR COMPLETED FORM TO:-

Mrs Julie Hartley
Windermere & Bowness Town Clerk
Dovedale
2 Smithy How
Casterton
LA6 2RX
TEL: 07951 402372
EMAIL: clerk@windermere-tc.gov.uk