Cy Young Days Festival Committee Membership form

Name:	
Address:	
City: State _	Zip Code
Email address:	
Phone: (home)(work)	(if able to receive calls)
Employer: Why do you want to be on the Cy Young Days Festival Committee?	
What or whom prompted your interest in th	ne committee?
What abilities, talents, and/or experience o	can you contribute to the committee?
	end (4th. Weekend in June)?
Will you be able to attend evening meeting	gs the second Tuesday of the month?
A member in good standing will:	
. ,	Executive Committee. Attend General committee eekend: a) work one shift in Festival booth or as rowd
Please complete and forward or mail to:	137 W. Main Street Newcomerstown, Ohio 43832 Attn. Janet Chaney

Or: chaney.janet8@gmail.com