

WILSON TOWNSHIP  
CHARLEVOIX COUNTY, MICHIGAN

Application

Thank you for your interest in serving on a Wilson Township board and/or commission. Please complete the following information and return to the Wilson Township Clerk.

Marilyn Beebe, Clerk  
01701 Fall Park Rd  
Boyne City, MI 49712  
Email: [marilynbeebe@charter.net](mailto:marilynbeebe@charter.net)  
Fax: 1-866-998-1922

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

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Board/commission/position you wish to apply for: \_\_\_\_\_

Reason(s) you wish to serve on this board: \_\_\_\_\_

\_\_\_\_\_

Community or civic service activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any special skills that may be helpful to Wilson Township?

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_