



NORQUAY VILLAGE

Neighbourhood Centre Program

APPLICATION for WORKING GROUP

If you are interested in being a member of the Norquay Village Working Group please provide the information requested below. We are requesting this information to help ensure that the working groups represent a broad spectrum of people in the area.

Working Group (please indicate preference):

- Shopping Area
- Housing Area

Name _____

Address _____

Phone (home): _____ Phone (work): _____

Fax: _____ E-mail: _____

Please tell us about yourself:

Have you been involved in community organizations or groups (e.g. Parent Advisory Council (PAC), Residents Association, etc.)? Please list the groups (if any) and indicate whether you are not or have been a board member.

Organization	Involvement		Board Member	
	Current	Past	Yes	No

Do you rent or own your residence? Rent Own

Do you own or work at a business in the Norquay Village study area? (see map reverse)

Neither Own Business Work

Please provide business address if different from address above _____

What languages do you speak? _____

What is your age group? Under 25 25-39 40-55 56-70 70+

Do you have children under 18 years of age: Yes No

What are the reasons you are interested in participating in this working group?

Please drop this form in the blue box, or send it to Debra Bodner

By Mail: Planning Department, City of Vancouver
453 West 12th Avenue
Vancouver, BC V5Y 1V4

By Fax: (604) 873-7898

