ISSAQUAH HIGH SCHOOL BOOSTER CLUB SPORT SPECIFIC ADVISORY COMMITTEE

CHAIR APPLICATION

Name:	Date:
Sport:	Coach:
Please explain why you would like	to be Chair of the Advisory Committee in question.
What experience have you had wit	th the program to date?
As a parent volunteer, what expersports teams and programs?	ience have you had in being a parent leader in other
Can you comply with the Advisory	Committee expectations as laid out in the Guidelines?
Please provide three (3) reference	es within the program:
Name / Contact information:	
Name / Contact information:	
Name / Contact information:	