



CONSENT TO SERVE FORM 20__ – 20__ COMMITTEES

- | | |
|--------------------------------|------------------------------|
| AUDIT (Member) | BYLAWS (Member) |
| PUBLICATIONS (Chair/Member) | BUDGET & FINANCE (Member) |
| PUBLIC POLICY (Chair/Member) | CERTIFICATION (Chair/Member) |
| EDUCATION (Chair) | MEMBERSHIP (Member) |
| WEBSITE (Chair/Member) | WAYS & MEANS (Member) |
| NOMINATION (Member) | |
| Ad-Hoc Committee's (as needed) | |

Name: _____ Credentials _____

Address: _____

Phone (_____) _____ - _____ (__ home __ cell __ work)

Chapter: _____ Chapter Board Position (if held): _____

Email: _____@_____ . _____

I AM WILLING TO CHAIR THE FOLLOWING COMMITTEE(S):

I AM WILLING TO SERVE ON THE FOLLOW COMMITTEE(S):

Please mail or email completed form to:
TSMA Executive Board
2507 Clover Ridge
League City, TX 77573 or
president@mytsma.org