

# WOODRIDGE COMMUNITY ASSOCIATION Candidate Registration Form

The Woodridge Community Association will be holding the Annual Meeting in April to elect a Board of Directors. The Board of Directors is the collection of volunteers who make decisions for the community. The Ballot Box has been contracted to conduct this election. Two (2) Directors will be elected this year.

Are you interested in volunteering time to serve on the Board? Want to have a say in what goes on in your community? Can you commit to attend meetings regularly? Can you make reasonable decisions for the betterment of the Association? If yes, you may complete this registration form and return. Please note that it is your responsibility as a candidate to review the Association's governing documents carefully to ensure that you meet the criteria and are committed to volunteering the time needed to serve on the Board.

Candidates **MUST** be registered by no later than **February 2, 2023, by NOON (12:00 PM)**. This form may be returned by mail to the address noted below, or via fax 1-866-648-7869 or email at office4@ballotboxservices.com. Each candidate may submit, along with this form, a statement\* of no more than one (1) side of an 8 ½" X 11" sheet of paper. The statement\* may include your photograph. The statement\* will be copied and mailed with the ballots to the membership exactly as submitted. Regardless of whether or not a statement\* is submitted, this completed application will not be mailed with the ballots. You will receive a confirmation notice of receipt of registration and another when your candidate eligibility has been verified. It is your responsibility as a candidate to ensure that your candidate registration form is received by The Ballot Box by the deadline date. If you do not receive a confirmation, we did not receive your registration.

**I ACKNOWLEDGE THAT I HAVE REVIEWED THE ASSOCIATION'S CANDIDATE ELIGIBILITY CRITERIA AND THAT TO THE BEST OF MY KNOWLEDGE, I MEET THE CRITERIA. I HAVE ALSO REVIEWED THE OBLIGATIONS AND REQUIREMENTS OF BOARD MEMBERS AND AM PREPARED TO FULFILL THOSE OBLIGATIONS TO THE EXTENT OF MY ABILITIES IF I AM ELECTED.**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address You Own in the Community: \_\_\_\_\_

Are you currently a member of the Board of Directors?  Yes  No

I have attached a one (1) page statement\* to be mailed with the ballots.  Yes  No

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

THE FOLLOWING INFORMATION WILL NOT BE PRINTED ON ELECTION MATERIALS (AS THIS FORM WILL NOT BE MAILED) AND IS FOR OUR USE TO CONTACT YOU IF WE HAVE QUESTIONS REGARDING THE INFORMATION SUBMITTED ONLY. YOUR INFORMATION IS NEVER SOLD OR USED FOR ANY OTHER PURPOSE.

Phone: \_\_\_\_\_

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

\*any optional statement MUST be submitted with the application. Late submissions will not be accepted.



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