

Region F  
Regional Water Planning Group

**MEMBERSHIP NOMINATION FORM**

Interest Group: \_\_\_\_\_

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

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

Phone - Work/Day: \_\_\_\_\_ Home: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

How does nominee represent the interest group? (i.e. - elected official, staff member/employee, member of organization/society, other)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Qualifications:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Attach additional information (resume, letter of recommendation, etc.)

**Return to:     John Grant, Chair**  
**Region F Regional Water Planning Group**  
**c/o Colorado River Municipal Water District**  
**P.O. Box 869**  
**Big Spring, TX 79721-0869**