## RAINBOW BEND HOMEOWNERS ASSOCIATION VOLUNTEER APPLICATION

Date:			
Name:			
Property Address:			
Please answer "yes" or "no": RBHOA	A Homeowner?		
Email Address:			
Phone Number(s):			
PLEASE CHECK THE COMMITTEE(	S) YOU ARE INTERESTED IN	SERVING ON:	
Budget & Financials Community Landscape	Clubhouse, Lot A&B, Recreation & Common Areas	Communications & Events RV Storage Lot	
Please list any information you would like the	he Board to know, such as experie	nce, accomplishments related to	
your committee interest(s), and/or how your	participation would benefit Rainb	oow Bend:	
Please return this completed form to:			
ATTN: Volunteer Application	Or: E-mail to: assis	Or: E-mail to: assistants@kenyonandassociates.com Or: Fax to 775-674-8010	
Rainbow Bend HOA	Or: Fo		
c/o Kenyon & Associates	OI. Ta		
645 Sierra Rose Dr., Suite 104 Reno, NV 89511	Or: Drop in the p	payment slot in the Clubhouse	
Official Use ONLY:			
BOD Review Date: Appro	oved: Not Approved:		
Notes:			