



VETERANS MEMORIAL

CITY OF EDINA

COMMITTEE/VOLUNTEER APPLICATION FORM

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

Special skills/experience that you might bring to this project (Fundraising, PR/marketing, Business contacts within the community, Desire to honor Veterans, Construction knowledge, Historical research, Accountant/financial background)

I WANT TO ASSIST IN THE PROJECT TO ESTABLISH A VETERANS MEMORIAL IN EDINA AS A:

_____ COMMITTEE MEMBER (Commit to attending monthly meetings for approximately the next 2 years; Be **directly** involved in fund raising; determine elements of the memorial and the selection of the artist producing a statue and researching those individuals killed in action who will be honored by this memorial).

_____ PROJECT VOLUNTEER (Assist the committee's efforts (on a **limited, selected basis**) in fund raising by manning booths at public functions, etc.; acting as a resource for the committee in providing military history information; providing experience/skills in various areas to include public relations/marketing, construction, etc).

(Please see the Data Practices Advisory on the next page)

DATA PRACTICES ADVISORY

Your name, address, current employment position, previous work history, education and training are public data under the Minnesota Data Practices Act (Minn. Stat. Sect. 13.43, subd. 2 & 3) and must be provided to anyone who requests it. Other information is considered private; however all information in this application will be provided to the Park Board in a public forum and may be reviewed in public. It will therefore be part of the public record. Although you are not legally required to provide any of the information requested in this application, the information is needed to determine your suitability for appointment to Veterans Memorial Committee and failure to provide it may result in you not being considered for a position.