



CITY OF CAYCE POTENTIAL MEMBER APPLICATION

Name: _____ Date _____

Home Address: _____ City, State, Zip _____

Telephone: _____ E-Mail: _____

Resident of Cayce: Yes No Number of Years: _____

Please indicate the Committee(s) for which you are applying:

- Accommodations Tax Committee Cayce Housing Authority Events Committee
- Consolidated Board of Appeals Municipal Election Comm Museum Commission
- Planning Commission Board of Zoning Appeals

Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation?

Yes No If yes, specify below.

Work Address

Company: _____ Position: _____

Address: _____ City, State, Zip _____

Telephone: _____ E-Mail: _____

Work Experience: _____

Educational Background: _____

Membership Information (Professional, Neighborhood and/or Civic Organizations):

Volunteer Work: _____

Hobbies: _____

Return to:
Mendy Corder, Municipal Clerk
City of Cayce, PO Box 2004, Cayce, SC 29171-2004
Telephone: 803-550-9557 ♦ Fax: 803-796-9072 ♦ Email: mcorder@caycesc.gov