



## Application for AAFPO Board

### GENERAL INFORMATION

First Name:

Last Name:

Physical Address in Angel Fire:

Angel Fire Property Owner Member Number:

Mailing Address:

Email Address:

Phone Number:

### DISCLOSURE

Article VI, Section 1 of the AAFPO By-Laws states: "No director shall be an employee of, nor receive compensation for any services he/she renders to the Developer or its successors."

Are you an employee, or do you receive compensation for any services rendered to Angel Fire Resort or its successors?

Yes  No

If yes, please provide details:

### AFFIRMATION

Please affirm that you have read and are familiar with the following governing documents:

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Amended Joint Disclosure Statement
<input type="checkbox"/>	<input type="checkbox"/>	Amended Joint Plan of Reorganization
<input type="checkbox"/>	<input type="checkbox"/>	AAFPO By-Laws
<input type="checkbox"/>	<input type="checkbox"/>	AAFPO Articles of Incorporation
<input type="checkbox"/>	<input type="checkbox"/>	Supplemental Declaration of Restrictive Covenants and Easements
<input type="checkbox"/>	<input type="checkbox"/>	New Mexico Homeowner Association Act



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### INFORMATION FOR VOTERS

The Association of Angel Fire Property Owners wants to provide details of the candidates' qualifications and positions regarding their candidacy for election to the AAFPO Board of Directors. Please fill in the information below as required. Please note that the information in this section will be shared with AAFPO Members in good-standing qualified to vote in the election.

Please list your professional / personal qualifications that you feel make you a good candidate for the AAFPO Board:

What do you think are the most important issues or improvements you would champion as a Director on the Board?

Please provide any other information you feel is important for voters to know about you:



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### DISCLAIMER

I, the Applicant for Candidacy on the AAFPO Board of Directors, certify that my answers are true and honest to the best of my ability. If this application leads to my eventual election to the AAFPO Board of Directors, I understand that any false or misleading information in my application may result in termination of my remaining term on the Board.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

Print Name \_\_\_\_\_

Please return completed applications to: **Election Chairperson, AAFPO Elections, PO Box 21, Angel Fire, NM 87710**