



# R A B

Restoration Advisory Board

## MEMBERSHIP FORM

### Conditions for Membership:

Restoration Advisory Board (RAB) members are expected to serve a term of 1 year and attend all RAB meetings or designate an alternative. The RAB meets about four times a year. Members who miss two or more consecutive meetings may be asked to resign. Duties and responsibilities will include reviewing and commenting on technical documents and activities associated with the environmental cleanup activities at Beale AFB, California. Members will be expected to be available to the community to share information and/or concerns between the community and the RAB. Members must reside within 35 miles of the Base.

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

Address: \_\_\_\_\_  
Street Apt.# City Zip

Phone: ( ) \_\_\_\_\_ Daytime Fax: ( ) \_\_\_\_\_

( ) \_\_\_\_\_ Home e-mail: \_\_\_\_\_

Briefly, state why you would like to be considered for membership on the Restoration Advisory Board (RAB):

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What has been your experience working as a member of a group representing a wide variety of interests but with common goals?

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If applicable, please state the names of any organization with which you are associated (optional):

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Which of the following apply to you as an individual? (Check all that apply).

- ☐ Local resident/community
- ☐ Business community
- ☐ Base employee/resident
- ☐ Local/regional environmental group
- ☐ Civic/public interest organization
- ☐ Religious community
- ☐ Labor organization
- ☐ Local homeowner
- ☐ Regulatory agency employee
- ☐ Medical community
- ☐ School district committee representative
- ☐ Native American
- ☐ Local government
- ☐ Other (please describe)

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Please indicate if you are interested in being considered for the community co-chairperson position on the RAB by checking the box below:

☐ *Yes, I would like to be considered.*

Are you willing to serve as a member of this RAB for 1 or more years?

☐ *Yes, I am willing to serve as requested.*

By submitting this signed form, you are aware that RAB membership requires regular participation and a commitment of time.

☐ *Yes, I am aware of the time commitment.*

By submitting this signed form, you willingly agree to work cooperatively with other members of the board to ensure efficient use of time for addressing community issues related to environmental cleanup of Beale AFB, California.

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*Signature*

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*Date*

Please mail completed application to Darren Rector, Restoration Program Manager, AFCEC/CZOW, 6451 B Street, Building 2535 Beale AFB, CA 95903-1708, email to Darren.Rector.2@us.af.mil, or bring to a RAB meeting.

