



301 13th St.

Clarkfield, MN 56223

320-669-1995

fax 320-669-1997

Board Member Application

Parent, Community Member, Friend of Organization

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

By signing this application I swear that the above information about myself is true and that I have the schools best interest in mind.

Print Name

Signature

Date