Idaho Department of Parks and Recreation
Trail of the Coeur d'Alenes Trail Commission
At-Large Member Application Form

Name: _____ Address: _____

Phone #: (Home) _____ City: _____ State: _____ Zip: _____

Phone #: (Work) _____ Email: _____

1. What knowledge or experience do you have that would contribute to the Commission?

2. (Pertinent) natural resource organizations you belong to:

3. As a member of the Commission, you would be representing what type of user?

4. What, in your opinion, is the highest priority of the Trail of the Coeur d'Alenes and the Commission?

6. Is your interest in the Commission through:
   - ❑ Membership in a club or organization
   - ❑ Commercial
   - ❑ User
   - ❑ Other (describe):_____

7. Which modes of transportation do you partake in that are applicable to the Trail of the Coeur d'Alenes?
   - ❑ Biking
   - ❑ Roller Blading
   - ❑ Hiking
   - ❑ Other _____
   - ❑ N/A

8. Approximately how often do you utilize the Trail of the Coeur d'Alenes? _____

Commission members are required to attend bi-annual meetings during the year and must sign a Memorandum of Understanding.