

Trinity Crossing Residential Association, Inc.

Board Member Candidate Questionnaire

2025 ANNUAL MEETING

Please fill out this profile form if you are interested in running for the Board of Directors

Homeowner Name: _____

Phone Number: _____

Property Address: _____

Email: _____

Please tell us about yourself: (spouse, kids, hobbies / interests, etc.)

Please write past experiences / work that qualifies you for a position of the Board of Directors:

What would you like to do for the association?

Do you have any commitments that will restrict you from serving on the Board of Director?
(Travel, Employment, other Meetings): _____

By submitting this form and signing below, I acknowledge that if elected I accept those responsibilities as described in the Governing Documents of the Association. I am also aware that information provided on this questionnaire will be published in the 2024 Meeting packet.

Signed: _____ Date: _____

Please email the form to sondra@legacyswhoa.com or submit your form on the community website by Sunday, Nov. 16, 2025.

