



**CITY OF WESTON BOARDS/COMMISSIONS**

**APPLICATION**

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

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Please mark each board/commission you wish to be considered.

- ☐ Planning Commission
- ☐ Arts Council of Weston
- ☐ Historical Landmarks Commission
- ☐ Board of Parks and Recreation
- ☐ Municipal Appeals Board
- ☐ Board of Zoning Appeals
- ☐ Weston Cemetery Board
- ☐ Weston Code of Appeal Board
- ☐ Weston Tree Commission

Please provide a detailed summary of your experience, education, and/or training that would contribute to the board and/or commission you are requesting appointment:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This application will be reviewed by the City of Weston Council. You will be contacted after the Council has rendered a decision. We appreciate your interest in assisting your local government!

*Revised 1/6/2026*