

PLEASE COMPLETE AND SUBMIT THIS FORM BY FEBRUARY 28, 2020

SPFA Committee Volunteer Interest Form



Contact Information

Name: _____

Title: _____

Company: _____

Email address: _____

Your mailing address (if different than what is listed in the membership directory at

<http://www.sprayfoam.org/membership>): _____

Participation

Committees meet with differing levels of frequency. It is rare that the committees meet in person. Most meetings are teleconferences and usually last 1-2 hours. Please select up to 3 committees and list them in order of preference (with 1 being your first choice.)

Committees: (2 year commitments)

Building Envelope Committee

Certification Committee

Consultant Committee

Equipment Committee

Roofing Committee

Safety Committee

Technical Oversight Committee

SPFA Expo and Convention Planning

Membership Committee

Brief description of SPF expertise you can offer the committee(s) you have selected:

Commitment

I understand that my membership must remain in good standing with SPFA in order to participate on a committee. SPFA does not fund any activities for committee participation, other than conference calls arranged by SPFA staff.

Signature: _____

Date: _____



Committed to SPF performance, safety and industry excellence.