



Spring Valley Lake Association  
13325 Spring Valley Parkway  
7001 SVL Box  
Victorville, CA 92395-5107

**SPRING VALLEY LAKE ASSOCIATION  
TASK FORCE APPLICATION  
(Gating the Community)**

Please complete this application, attach a resume or other information you feel appropriate, and return to the Association Office.

**MEETING TIMES (Subject to change)**

**Gating the Community Task Force**

Day and Time – TBD

**PLEASE PRINT AND COMPLETE ALL FIELDS OF INFORMATION**

Name: \_\_\_\_\_ Account # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

**Please list any previous Spring Valley Lake Task Force/Committee/Board experience, if any:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I want to become a member of this Task Force because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Please return this form to the Association Office**

Association Office – 760.245.9756  
Public Safety – 760.245.6400  
Fax – 760.245.3076  
Website – [www.svla.com](http://www.svla.com)