

HARBOR COVE TIMESHARE OWNERS ASSOCIATION (HCTSOA)

BOARD OF DIRECTORS - CANDIDATE FORM

November 8, 2025 Annual Elections

Instructions: Complete this form only if you are running for a board position. Once completed, return the form to the association using the directions at the bottom of this page. This form will be printed as is and must not exceed a one page-single sided 8.5 by 11 inch information sheet. Do not send this form with your Annual Proxy form or your maintenance fee payment.

We encourage all applicants to use this form which will be posted on our website as a pdf or contact Cheryl Schmelzle by email at schmelzle@scpa.pro for an excel or pdf version or paper copy.

I, _____ hereby place my name in nomination as a candidate for the
Board of Directors of the HCTSOA. I understand that I am responsible for the accuracy of the
information submitted herewith.

CONTACT PHONE: _____

ADDRESS: _____
STREET CITY STATE ZIP

PREFERRED EMAIL: _____ OCCUPATION OR RETIRED: _____

UNIT/WEEKS OWNED

PAST BOD MEMBER

If so, provide dates served and position held:

FOR HCTOA ?
HOW HAVE YOU
USED YOUR WEEKS?

In the last 3 years?

Last time you personally occupied any of your weeks?

WHAT YEAR DID YOU ACQUIRE FIRST WEEK

MOST RECENT WEEK

ABOUT YOURSELF:

Experience

Special Skills

Interests-Hobbies

Benefits of your service
as a BOD member

Occupational skills

About you and your family

Wish list for HCTS units

SIGNATURE:

DATE SUBMITTED

COMPLETED FORM TO:

Cheryl Schmelzle - President
Email: schmelzle@scpa.pro

Mail: Harbor Cove Timeshare Owners Association
Attn: Cheryl Schmelzle
1450 W Long Lake Rd Suite 165
Troy MI 48098