



**Bicycle & Pedestrian Advisory Committee (BPAC)
Duluth-Superior Metropolitan Interstate Council**



Membership Form (3 year term)

Applicant Name _____

Representing _____

Municipality of work/residence (highlight or circle one or both) _____

Phone _____ E-mail _____

The Purpose of BPAC

Identify bicycle and pedestrian issues and needs with respect to the regional transportation system and to provide feedback and technical advice on related policies, programs, projects, plans and studies.

Please tell us why you would like to join the BPAC

What skills, abilities, and/or experience do you bring to the BPAC?

What would you like to accomplish while being on the BPAC?

****Optional** Name and email or phone number of a person of reference:**

Submit completed applications to BPAC Staff Coordinator:

Eli Norlander enorlander@ardc.org