ADVISORY BOARD APPLICATION FOR MEMBERSHIP AND MEMBER PROFILE

NAME:	BIRTHDAY:
Preferred contact method (check one):	
□ home	
□ business	
□ e-mail	
□ cell	
_ _	
Best time to reach me:	
BUSINESS	
Company Name:	
Title:	
Address:	
Phone:	_Fax:
Email:	
HOME/FAMILY	
Address:Phone:	Call:
Email:Spouse name:	
Childr	
orman	
HOBBIES/INTERESTS:	
EXPERIENCE(S) AS A MEMBER OF OTHER	BOARDS:
·	

EXPERIENCE AND ASSETS I CAN CONTRIBUTE TO THE BOARD:
Accounting/Financial Expertise
Legal Expertise
Education Expertise
Healthcare/Medical Industry Expertise Social Work Experience
Nonprofit Experience
Public Speaking
Management
Marketing
Public Relations
Fundraising
Parent Strategic Planning
Special Event Planning
Problem Solving
Media Contacts
Access To Influential People

WHY I AM INTERESTED IN SERVING AS A MEMBER OF THE ADVISORY BOARD:

WHAT I HOPE TO GAIN FROM SERVING ON THE BOARD: