

Application for Board of Directors

Please print

Date _____

Name _____ Title _____

Organization _____

Phone _____ Email _____

How long has your organization been in the community? _____

Years Chamber member? _____ Have you served as an Ambassador? ☐ Yes ☐ No

Other Chamber activities _____

How many hours a month do you think you can devote to Board activities? _____

Other board experience *(Please give details)* _____

Other organizations to which you belong _____
