

Butler & Watauga Valley Heritage Association, Inc.
Board of Directors Application Form

Thank you for your interest in joining the Butler & Watauga Valley Heritage Association Board of Directors. Complete the following application which will help us consider your request. Please note that your information is kept confidential and will be shared only with our existing Board of Directors. We appreciate your willingness to serve!

Your name: _____

Your home phone number: _____ Cell number: _____

Your address: _____

Your email address (please write it carefully):

Briefly describe why you would like to join our Board of Directors:

Your current organizational affiliations (names of the organization and your role(s)):

1. _____
2. _____
3. _____
4. _____

Which of your skills would you like to utilize on the Board? Check those that apply:

- | | | |
|----------------------------------------------|-----------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Board development | <input type="checkbox"/> Financial management | <input type="checkbox"/> Special events |
| <input type="checkbox"/> Strategic planning | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Historical archives | <input type="checkbox"/> Museum tours | <input type="checkbox"/> Volunteer coordination |
| <input type="checkbox"/> Program development | <input type="checkbox"/> Community networking | <input type="checkbox"/> Facilities management |

Other skill(s) of yours that you would like to utilize? _____

What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?

By submitting your application for consideration, you are confirming that you are able and willing to attend the required number of board meetings. You are also affirming there are no apparent conflicts of interest that would prevent you from serving as a board member.

Your signature: _____ Date: _____

If you are not selected as a member of the Board, or if you decide not to join, would you like to be a volunteer to assist our organization in various ways that match your skills and interests?

- Yes No Perhaps