

## **Board of Directors Application**

| Contact Information   |                                 |  |
|---|---------------------------------|--|
| Name  |                                 |  |
| Street Address  |                                 |  |
| City ST ZIP Code  |                                 |  |
| Home Phone  |                                 |  |
| Work Phone  |                                 |  |
| E-Mail Address  |                                 |  |
| L Hull Address  |                                 |  |
| Interests   |                                 |  |
| Tell us which areas you might be interested in assisting with.  |                                 |  |
|   | e be interested in desisting th |  |
| Public Relations  | Fundraising                     |  |
| Events  | Website Management              |  |
| Administration  | Grant Writing                   |  |
|   |                                 |  |
| Special Skills or Qualifications  |                                 |  |
| Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. |                                 |  |
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|   |                                 |  |
| Previous Volunteer Exp  | erience                         |  |
| Previous Volunteer Exp Summarize your previous vol  |                                 |  |
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## **Our Policy**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. The Alyce Hatch Center Board of Directors meets once a month.

Thank you for completing this application form and for your interest in volunteering with us.

Please mail to:

Alyce Hatch Center c/o Board of Directors 1406 NW Juniper Street Bend, Oregon 97701