

Application for Board Membership

Please fill in the following information and return to:

Avalon Theatre Foundation

Attn: Board Development Committee

PO Box 2243

Grand Junction, CO 81502

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**

Name:

First Middle Initial Last

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Easiest way to contact me \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**About Me** (Please use the back of the page if needed to complete):

Have you served on boards or committees for other organizations? If yes, please list:

What are your goals for serving as Avalon Theatre Foundation Board Member?

What role do you think the Avalon Theatre Foundation should serve in the community?

What special strengths, talents, or skills can you bring to the Avalon Theatre Foundation Board?

Which of the following areas interest you and why? \_\_\_\_\_ Finance \_\_\_\_\_ Grant Writing

\_\_\_\_\_ Marketing \_\_\_\_\_ Fund Raising \_\_\_\_\_ Special Events \_\_\_\_\_ Long Range Planning & Development

Please attach a brief biography and/or resume. Thank you for your interest in the Avalon Theatre Foundation.