

Flamingos for Amber

(270) 993-3711 flamingosforamber@gmail.com

Potential Board Member Questionnaire

Name:	
Address:	
Email Address:	Cell Number:
Emergency Contact:	
Emergency Contact Phone:	Relationship:
Previous Board Experience:	
Description of training or experience that may be pe	ertinent to the board position:
Certifications such as First Aid and CPR? YES or NO	Valid Driver's License? YES or NO
Personal Reference(name, phone number, and emai	il):
Reason for Interest:	
How did you hear about us?	
Are you available the 2 nd Tuesday of every month fro	om 6pm for monthly board meetings? YES or NO
	olunteer service, we operate under Equal Employment y Guidelines.
We reserve the right to have b	background checks performed.
Signature	



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Have you ever been impacted by a debilitating illness or injury?

If you are comfortable, please tell us a little bit about your story.	

May God bless and keep you always May your wishes all come true May you always do for others And let others do for you May you build a ladder to the stars And climb on every rung And may you stay forever young.

Bob Dylan