

JAX Chamber Council Board of Directors Application

(All Applications Are Subject To Board Review)



Name: _____

Company Name: _____

Business Address: _____

Phone: _____ Mobile: _____ Fax: _____

Email Address: _____

For which Council Board are you applying? _____

Additional Information

Current community and/or business affiliations: _____

Current community volunteer work: _____

What interests you about serving on a Council Board? _____

Whom do you currently know in this organization? _____

What do you feel you will contribute as a Board member? _____

If asked, will you serve on the Executive Committee as an officer (President, Vice-President, Treasurer, Secretary or Program Officer)? Yes No Comments: _____

Commitment

I agree to:

- | | |
|--|---|
| <input type="checkbox"/> Attend monthly council general meetings, board meetings and assigned committee meetings, plus special events, totaling approximately six hours per month | <input type="checkbox"/> Support Council events (volunteering, fundraising, ticket sales and purchase, etc.) |
| <input type="checkbox"/> Serve as an officer, committee chair or co-chair, or as a task force chair each year | <input type="checkbox"/> Personally publicize the council (word of mouth, invite friends and colleagues, etc) |
| <input type="checkbox"/> Not miss 3 consecutive monthly board or general meetings | <input type="checkbox"/> Utilize personal resources to solicit donations, ticket sales, etc. |
| <input type="checkbox"/> Attend the annual board retreat | <input type="checkbox"/> Fulfill my three-year term |

I affirm my status as a member in good standing of the JAX Chamber and this Council.

Signature _____ Date _____