



Thank you for your interest in joining The Horsham Dog Park Board! Use this form to provide useful information about yourself, to ensure the best match between you and the Horsham Dog Park that might want to consider you for its Board of Directors.

The following information will be shared:

Your name: \_\_\_\_\_

Your Home Phone Number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Your address: \_\_\_\_\_

\_\_\_\_\_

Your email address (please write it carefully):

\_\_\_\_\_

Do you have a dog? YES or NO ( If Yes, name & age of dog (s)

\_\_\_\_\_

\_\_\_\_\_

Do you use the Horsham Dog Park? YES or NO

Do you believe in following ALL the rules of the dog park? YES or NO. If no, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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"/> Training              |
| <input type="checkbox"/> Strategic planning  | <input type="checkbox"/> Fundraising          | <input type="checkbox"/> Marketing             |
| <input type="checkbox"/> Staffing / HR       | <input type="checkbox"/> Evaluation           | <input type="checkbox"/> Volunteer management  |
| <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? \_\_\_\_\_

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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.?

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What is your availability for meetings?

- Mon Time: \_\_\_\_\_
- Tues. Time: \_\_\_\_\_
- Wed. Time: \_\_\_\_\_
- Thurs. Time: \_\_\_\_\_
- Fri. Time: \_\_\_\_\_
- Sat. Time: \_\_\_\_\_
- Sun. Time: \_\_\_\_\_

If you join the Board, you agree that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, you do not have any conflict-of-interest in participating on the Board and promise to make sure the rules of the dog park are followed at all times.

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