

Board Member Application

NAME:		Date:	
	НОМІ	E	
Day phone:		Evening:	
Cell:	Email:	Fax:	
Address:			
	OFFIC	CE	
Employer:			
Phone:	Email:	Fax:	
Education:			
	ons you would make an ef and abilities (use extra pa	ffective CFI board member. Include ge if necessary)	
Other board experi	ence:		



Professional	l/comm	unity
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Memberships_____

Fundraising Experience:_____

What is your ability to raise funds in your community?_____

How will your corporation contribute to your direct contribution?

List current CFI board members you know:

Please complete and submit with a copy of your resume to:

Board President: Allie Corrigan-Luke Email: allie@onebizshoppe.com

7801 Bridgeport Way W. Suite 200 Lakewood, WA 98499 Additional space to list reasons you would make an effective CFI Board Member, including professional skills and abilities: