

**Turn In Poachers
Board of Directors Application**

Date _____

Name _____

Address _____

City/State/Zip Code _____

Phone: (H) _____ **(W)** _____ **(Cell)** _____

E-mail Address _____

Are you a TIP member? _____ **Y** _____ **N** **For how long?** _____

Have you attended any TIP banquets, or other fundraisers? _____ **Y** _____ **N**

If yes, when and where? _____

Have you volunteered for any TIP committee or project? _____ **Y** _____ **N**

If yes, when and where? _____

Nominated by: _____

Are you a member of any other conservation or volunteer organization affiliations? _____

Why do you wish a seat on the Board of Directors? _____

What special talents, skills or opportunities will your election bring to TIP? _____

Are you familiar with the operation of the Board and requirements of Directors and Officers? _____

If nominated, all candidates for election must be in attendance at the December Annual Meeting.