

NARHA Board of Trustees Application Form

Name _____

Address _____

email _____

Telephone:

(home) _____ (work) _____ (cell) _____

Present Occupation/Place of Employment _____

What interests you about serving on NARHA's board of trustees?

What has been your prior experience with nonprofit membership organizations?

Have you served (or are currently serving) on other nonprofit boards? If so, which one(s) and what was or is your role?

How much time will you be able to commit to board activities per month?

What type of leadership roles have you held?

What is your fundraising experience?

What is your finance experience?

How do you think you can help NARHA in fulfilling its mission?

It is a requirement of our bylaws that trustees are voting members of the association. Are you a current NARHA member or are you willing to become one?

What has been your experience with equine assisted activities?

What can we do to ensure that your participation is meaningful, fulfilling and rewarding?