



Application for Appointment to the Board of Directors  or the Board of Advisors  (Check Preference)

Name \_\_\_\_\_ E-mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

**Please Check Your Preferred Method of Contact**

E-mail     Home Phone     Cell Phone     Work Phone     Mail

Explain your interest in Community Agriculture Alliance:

Share your past and current experience with other nonprofit Organizations, Affiliations, Community Service and Volunteer related experience (Use back page of application if necessary):

What knowledge, experiences or skills are you willing to contribute to our Board: Check all that apply.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Accounting                 | <input type="checkbox"/> Agriculture Production | <input type="checkbox"/> Agri-Tourism                  |
| <input type="checkbox"/> Agri-Business              | <input type="checkbox"/> Retail Business        | <input type="checkbox"/> Corporate Business            |
| <input type="checkbox"/> Communications             | <input type="checkbox"/> Community Relations    | <input type="checkbox"/> Computer/Website/Social Media |
| <input type="checkbox"/> Conservation/Preservation  | <input type="checkbox"/> Construction           | <input type="checkbox"/> Education                     |
| <input type="checkbox"/> Environment                | <input type="checkbox"/> Event Planning         | <input type="checkbox"/> Finance/Banking               |
| <input type="checkbox"/> Fundraising                | <input type="checkbox"/> Grant Writing          | <input type="checkbox"/> Leadership                    |
| <input type="checkbox"/> Legal Counsel              | <input type="checkbox"/> Local Food (Systems)   | <input type="checkbox"/> Local History                 |
| <input type="checkbox"/> Local Product Development  | <input type="checkbox"/> Motivation             | <input type="checkbox"/> Management/Administrative     |
| <input type="checkbox"/> Marketing/Public Relations | <input type="checkbox"/> Natural Resources      | <input type="checkbox"/> Organizational Skills         |
| <input type="checkbox"/> Public Speaking/Relations  | <input type="checkbox"/> Real Estate            | <input type="checkbox"/> Recreational Business         |
| <input type="checkbox"/> Volunteer Management       | <input type="checkbox"/> Other _____            |  |

Your Commitment to Community Agriculture Alliance includes giving of your Time, Treasures and Talents. Please confirm your commitment to the specific Director/Advisor roles below:

Attend and participate in quarterly Directors meetings	
Assist in planning and implementing at least one CAA program or event	
Support CAA financially through membership or sponsorships	
Encourage CAA membership, sponsorships and financial support by others	
Represent and promote CAA, through outreach and advocacy as a vital organization in our communities and region.	
Participate with annual fundraising event	

Signature \_\_\_\_\_

Date \_\_\_\_\_