BOARD MEMBERSHIP FORM

FARMER CITY HAUNTED FOREST

Complete the form below sign up for membership

Board Members must:

We able and willing to assist in completing tasks for the Haunted Forest, support the nonprofit's values, demonstrate a high degree of professionalism, arrive on time for event meetings, following instructions, and improving the overall workings of the nonprofit.

Full Name :			
Full Address :			
E-Mail :		Phone	e :
Date Of Birth :		Driver Licens	se : Yes No
If younger than 18, Parent's :	D D M M Y Y	Dhana	
information:		Phone	e ;
Which of the following are areas you're willing to assist with?			
Scaring in the	e Forest		Safety/Security
Supervising on Hayracks			Vendor Sale
Set up of the Haunted Forest			Barrel Train
Tear down/Clean up of the Haunted Forest			Children's Matinee
Technology Support			Pumpkin Carving
Advertising			Others
Have you ever been convicted of a Felony: Yes No			
Please Explain:			
Membership Level (A) Board Involvement, volunteer hours for planning of the event: Yes No		Membership Level (B) Event Involvement, volunteer hours for execution of the event: Yes No	
		No	
	■ More Information: Farmer City Haunted Fore PO Box 196 Farmer City, IL 61842	st	