

## **Board Member Application**

<u>Mission</u>: Flying Pig Thrift exists to collect and sell donated materials and donate money to local nonprofits who work to end gun violence and promote social justice.

Name	Birthday (Month/Day)
Street address	
City, State, Zip	
Phone Number	Email
Your pronouns	
Emergency Contact (Name &	Phone)
Emergency Contact's relation	ship to you
Please list allergies and/or ac	commodations needed
Please tell us why you want t	o volunteer on the Flying Pig Thrift Board of Directors. Please describe
your work/professional backs	ground, any previous Board experience, and how you like to spend your
free time.	
Committee Interests: Market	ting/Social Media Events Volunteers
<b>NOTE</b> : Board Meetings are th	ne 3rd Monday <u>every</u> month at 7 p.m. via Zoom. Board members <u>must</u>
attend all meetings unless ab	sence is arranged at least 3 days in advance. Board members are expected
to assist on a committee or w	work on a special project, as needed and, if possible, are encouraged to
support Flying Pig Thrift by vo	olunteering in the store and/or by making an annual financial donation.
Board elections are held in D	ecember at the Annual Meeting and those elected commit to serve on the
Board for the next January-D	ecember. I have read, understand and agree with these terms.
I certify that I am at least 18	years old, and that the information provided here is true and correct. I
understand that I am offering	g my services on a strictly volunteer basis and that the Board of Flying Pig
Thrift will review and vote or	this Application at its next meeting. I agree that Flying Pig Thrift may use
my photos for publicity purpo	oses. I agree to have fun on this Board supporting Flying Pig Thrift!
Signature:	