



Flying Pig
Thrift

Board Member Application

Our mission: Flying Pig Thrift exists to honor the founder's sister by providing a unique, energizing and downright fun nonprofit cooperative where shoppers can find thrifty treasures while benefiting local nonprofits.

Name: _____ Birthdate (no year): _____

What pronouns do you use? _____

Please tell us a little about yourself! Feel free to include your work/professional background, previous board experience (if applicable), and how you like to spend your free time!

Why are you interested in joining our board? _____

Committee Interests: Marketing/Social Media _____ Finance _____

Events _____ Coordinating with Nonprofits _____ Volunteers/HR _____

Our Board Meetings take place the third Monday of every month at 7 p.m. via Zoom. Board members must attend all meetings unless absence is arranged in advance. Board members are expected to assist on at least 1 committee and are strongly encouraged to provide additional support to Flying Pig Thrift by volunteering in the store and/or by making an annual monetary donation.

Are these terms agreeable to you? _____

Board Elections are held at the Annual Meeting each year. Officers and Board members elected at the Annual Meeting are: Chair, Vice-Chair, Secretary, Treasurer, and At-Large. Once elected, board members commit to serving for 1 year, until the next annual meeting.

Please list any accommodations needed, or health conditions you would like us to be aware of that may impact your availability: _____

Emergency Contact Name and Phone Number _____

Emergency Contact's relationship to you: _____

I certify that the information provided here is true and complete. I understand that I am offering my services on a strictly volunteer basis and that the Flying Pig Thrift will review and vote on this Application at its next Board meeting. I agree that Flying Pig Thrift may use my photos for publicity purposes. I agree to have fun on this Board supporting Flying Pig Thrift!

Signed _____ Print Name _____

Mailing Address(REQUIRED): _____

City, State, Zip: _____

Phone Number _____ Email _____

