

## NATIONAL WALKING HORSE ASSOCIATION BOARD OF DIRECTORS/OFFICER APPLICATION

	I am applying for	an Officer Position	
I am from the following region (circle one): Northeast Southeast Central	position (circle one):	the following officer	
Vestern	President Vice-Presid	ent Secretary Treasurer	
Name:	NWH	NWHA #	
Address:			
City:		Zip:	
Phone:Ema			
Please answer these questions:			
1. How long have you been a member of NWHA?			
2. What contributions (other than monetary) have which you were a member)?	you made to NWHA (inclu	ide any committees of	
which you were a member)!		,	
		, 	
		, 	
3. Why do you want to be a director/officer?		, 	

5. Please list any other organizations, equine or otherwise, of which you are a member

6. Please list three (3) oth	her NWHA members we can conta	ct as references:
#1 Name:	Phone:	Email:
#2: Name:	Phone:	Email:
#3: Name:	Phone:	Email:

- I understand that the commitment of a Board member is extremely important and by signing this application, I agree to abide by these guidelines:
- I agree to uphold NWHA's Mission and Bylaws at all times.
- I agree to follow the direction of the NWHA Board even though I don't always personally agree with the Board's final decision.
- I agree to attend and participate with monthly Board calls, annual retreat, and other duties as assigned.
- I understand that my commitment includes having a readily available and operable phone and email account and therefore, I agree to regularly participate in Board Meetings by phone and email or other media as applicable.
- > I agree to listen, reason and maintain an open mind to all opinions and comments.

Applicant's Signature

Date

## Please return completed application by October 15 to:

National Walking Horse Association PO BOX 12430 Reading, PA 19612

Or send via email to: office@nwha.com with subject line: BOD application.