



New Brunswick Aviation Museum
Board of Directors Application Form

First Name: _____ Last Name: _____

Street Address: _____ City/Municipality: _____

Province/Postal Code: _____

Phone number: _____ Cell Phone Number: _____

Current Occupation: _____ Current Employer: _____

What are your interests in serving on the Board of the New Brunswick Aviation Museum?

What specific skills, experience, or expertise do you bring to the board?

Do you have any prior experience serving on a board or in a leadership role? If yes, please describe:

Please indicate any areas of expertise you can contribute to the board (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Aviation Knowledge/Experience | <input type="checkbox"/> Legal Experience |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Fundraising/Development | <input type="checkbox"/> Educational/Outreach |
| <input type="checkbox"/> Marketing/Public Relations | <input type="checkbox"/> Other _____ |

Board meetings are held quarterly. Are you able to commit to regular attendance and participation?

Yes No

Are you willing to participate in additional committee work and special events as needed?

Yes No

Is there any additional information you would like to share with us regarding your application?

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge.

Signature: _____

Date: _____

Please complete this form and return it to Carol Alderdice at Alderdice_7@hotmail.com. If you have any questions, please contact me.

Thank you for your interest in serving on the board of the New Brunswick Aviation Museum.