Fair Hill Therapeutic Riding Center

BOARD MEMBER CANDIDATE APPLICATION FORM

Name_____Date_____

Address_____

Email_____Preferred Phone_____(other)_____

Present Occupation/Place of Employment_____

PLEASE ATTACH YOUR RESUME TO THIS APPLICATION

1. What interests you about serving on FHTRC's board?

2. What has been your experience with nonprofit organizations?

3. How much time would you be able to commit to board activities per month?

4. Describe 3 specific ways that you believe you can help FHTRC achieve its goals.

5. What would be helpful for you to have from FHTRC's board and staff to ensure that your participation is meaningful, fulfilling and rewarding?

Please submit application to:
FHTRC
Attention of: Sally Wasylyk
PO Box 396, Waymart, PA 18472

You may also email to:
FHTRC2019@gmail.com