



BOARD OF GOVERNORS APPLICATION FORM

Name _____

Full Mailing Address _____

Telephone : Home _____ Voice Mail/Answering Machine?
yes ___ no ___

Work _____ yes ___ no ___

___ I am a Gallery member. ___ I would become a Gallery member.

___ I am/have been a member of another public art gallery.

___ I have served on the Board of the following nonprofit organizations:

Please indicate below what areas you would like to contribute to as a Board member, and your related skills, knowledge and experience.

_____ Art Classes and Instructing
_____ Fundraising
_____ Finance
_____ Personnel

over

What training and experience have you had in these areas that would be relevant as a Board member of a public art gallery?

Time Commitment: Five to ten hours per month, to prepare for and attend monthly Board meetings and the Annual General Meeting, in order to participate in the discussions and the deliberations of the Board.

Orientation time to become familiar with the Gallery's operations and the legal requirements of Directors of a nonprofit charitable organization.

Attendance at the Gallery's fundraising events.

I am willing to make the time commitment required to carry out the legal duties as of a Board member.

Date: _____ Signature of Applicant: _____

Complete this Application Form and submit with a cover letter, brief resume including names and contact information of 2 character references

by email to art@thelindsaygallery.com

by fax to 705-324-9349

by mail to or drop off at

THE LINDSAY GALLERY INC
190 Kent St. West, Lindsay, ON K9V 2Y6

Thank you for applying. You will be contacted by a Board Member.