

Board of Directors A	pplication
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Date:		
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Name:			
Home Address:			
City: Stat	State: Zip:		
Home Phone:	Home Fax:		
Personal Email:			
Gender:	Birth Date:		
Business/Organization:			
Title:			
Business Address:			
City: State: Zip:			
Business Phone:	Business Fax:		
Business Email:			
Please contact me at:	☐ Business		
☐ Check here if you don't want your mailing address included in the membership roster			
Emergency Contact:	Relation:		
Phone 1:	Phone 2:		
EDUCATION			
Undergraduate Institution:			
Degree & Major:			
Graduate Institution:			
Degree & Program:			
Activities:			
Honors/Awards:			



Why are you interested in serving on the Board of the Boston Pride Committee?	
What skills/experience can you contribute to the Boston Pride Committee?	
What are your particular interest areas in regards to serving on the Board of Directors for a major LGBT organization?	
What other professional or social organization(s) are you a director/member of?	
I certify that the information I have provided is true and accurate to the best of my knowledge.	
Print Name:	
Signature:	

The Mission of the Boston Pride Committee:

The Boston Pride Committee, serving the lesbian, gay, bisexual, transgender, and ally community, works to enhance the visibility of Boston's LGBT community through a week of events, in conjunction with year round activities, to promote LGBT awareness, dignity, and understanding.

Please submit this application with a copy of your resume to the address below Attn.: Board Search Direct questions to 617.262.9405 or <u>president@bostonpride.org</u>.