

SEBASTIAN SHARKS BOARD MEMBERSHIP QUESTIONNAIRE

Thank you for your interest in serving as a board member of the Sebastian Sharks Youth Football and Cheerleading Association. Please complete the following questionnaire so that we can make the best use of your talents and expertise and offer you the most rewarding experience as a member of the group.

Name: _____

Business Affiliation/Title: _____

Mailing Address: _____

Home phone: _____ Cell phone: _____

Email: _____

Please circle the board position that interests you most (*all listed positions are 2 year term*):

- | | |
|--------------------------|---------------------------|
| President | Player Safety Officer |
| Vice President | Equipment Director |
| Secretary | Communications Director |
| Treasurer | Team Parent Director |
| Tackle Football Director | Concession Stand Director |
| Cheerleading Director | Fundraising Director |
| Flag Football Director | Grounds Manager |

What is your experience as a member of other community groups?

What is your definition of youth football and youth cheerleading?

What type of life experience(s) have you had which would add to your being a member?

Why do you want to serve as a board member for the SSYFCA?

I understand that I must attend scheduled Board Meetings. yes no

I understand that I must open or close the field for all scheduled home games. yes no

I understand that I must be available to assist the organization with all league events/activities. yes no

I understand the duties of the Board position that I am applying for. yes no

Please return completed application to the
Sebastian Sharks Youth Football Association:

In Person: Field House, 1101 Barber St, Sebastian
By email: sebastianyouthsharks@gmail.com