

LOWER PERK LITTLE LEAGUE

BOARD OF DIRECTORS NEW MEMBER APPLICATION

Name: _____

Address: _____

Email: _____ **Cell Phone:** _____ - _____ - _____

Ages of past, current, or future players with LPLL:

Child 1: _____ Male Female

Child 2: _____ Male Female

Child 3: _____ Male Female

Child 4: _____ Male Female

Child 5: _____ Male Female

What is your volunteer experience with LPLL?

Coach

Umpire

Previous Board Member

Assistant Coach

Snack Stand

Other _____

Please describe your interest in joining the LPLL Board of Directors. What is important to you?

All LPLL Board members have a working role (e.g. executive board roles, safety commissioner, fundraising, scheduling, facilities, etc.)? In what capacity would you be most interested in serving?

I understand if I am elected to the Board that I will serve on the Board for a one (1) year term. I understand that if elected to the Board I will still need to submit my name for each year thereafter that I desire to be elected to the Board. I understand once the Board has been elected I will be given notice of the date and time of the first newly-elected Board meeting and my responsibilities and other duties as per the PLL Constitution. All votes shall be casted by current Board Members only.

Signature of Applicant: _____ **Date:** ____/____/____