



BC Fire Board Application

Name (Last, First, Middle Initial) _____ Date _____

Street Address, City, ST, ZIP Code _____

Home Phone Number | Cell Phone Number _____ Email Address _____

Position Applying for:

- President
- Treasurer
- Coaching Director

- Vice-President
- Registrar
- Other: _____

- Secretary
- Community Rep

Availability:

- Monday
- Thursday
- Sunday

- Tuesday
- Friday

- Wednesday
- Saturday

Do you have a Risk Management Number? Yes No

If yes, please indicate your Risk Management Number: _____

Your signature below authorizes validation of your risk management number or a background check in the event you do not have a risk management number.

Previous Board Experience:

Example:	1993 to 2001	Outdoor Sports	Director of Fund Raising
	Duration	Board	Position

Work Experience:

Education? High School Bachelor Masters PhD Other: _____

Focus of Study:

Certifications:

Additional qualifications and contributions that would be beneficial to BC Fire Soccer Club:



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My signature indicates that all information is accurate:

Name

Date

For Administrative Use Only: _____

Date received

Action taken

Official signature

Date

Attach additional documentation, if applicable.