

# San Francisco Bay Area Leather Alliance

## Individual Director Application

I hereby request consideration for election to the post of Individual Director with the San Francisco Bay Area Leather Alliance:

Full Name \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ /19\_\_\_

Street Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone: C \_\_\_\_\_ H \_\_\_\_\_

E-mail: \_\_\_\_\_

Employment Status: Full\_\_ Part\_\_ Retired\_\_ Unemp\_\_ Other \_\_\_\_\_

Please complete the Community Questions section on the reverse, & attach additional information as needed.

By signing below, I acknowledge that:

- . I understand the duties & requirements for Alliance Individual Directors, and will do my best to actively fulfill them.
- . I am in agreement with & will support the Mission & Purposes of the Alliance.
- . I have received a copy of the Alliance Bylaws and Policies; it is my responsibility to become familiar with them & to abide by them in my activities as an Individual Director.
- . I understand that the Alliance is a 501c3 nonprofit corporation which must abide by both US & Ca regulations regarding our activities & projects.

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Admin Only

Received by: \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

Term Applied for: \_\_\_ / \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ / \_\_\_ Full \_\_\_ Partial \_\_\_

Sponsoring/Nominating Director: \_\_\_\_\_

Action taken: \_\_\_\_\_

## Community Involvement

1. How long have you lived in the SF Bay Area? \_\_\_\_\_

2. How long have you supported the SF Bay Area Leather/Fetish/MC Community? \_\_\_\_\_

In what ways? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Leather/Fetish/MC Org Memberships/Affiliations, Length, Positions Held, & current Status?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Current or Previous Titles, & Years, Held? \_\_\_\_\_

\_\_\_\_\_

5. Leather/Fetish/MC Community Involvement in Other Cities?      Years/Groups/Activities:

\_\_\_\_\_

-

\_\_\_\_\_

\_\_\_\_\_

7. What skills & resources do you bring to the Alliance? \_\_\_\_\_

\_\_\_\_\_

8. What are your areas of Proposed Focus? \_\_\_\_\_

\_\_\_\_\_

9. Why do you want to be an Independent Director? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_