



SARNIA HISTORICAL SOCIETY 2017 BOARD MEMBER APPLICATION

APPLICANT INFORMATION

Name:

Home Address:

City:

Postal Code:

Home Phone:

Email:

Cell Phone:

INFORMATION

Please list any background information you consider important to this application, including why you are interested in joining the board.

Please list any of your skills, experience, knowledge, or perspectives that you would consider valuable as a board member, including any specific roles you'd like to fill or projects you'd like to work on.

Please return the completed form no later than Monday January 9th to:

Sarnia Historical Society
247 Cassandra Blvd.
Sarnia, ON
N7S 0A3

Or by email to: info@sarniahistoricalsociety.com