



www.bismarckyouthbaseball.org

Board of Directors Interest Form

Personal Information:

NAME: _____

PHONE: _____

ADDRESS: _____

YEARS IN BISMARCK AREA: _____

EMAIL ADDRESS: _____

QUESTIONNAIRE:

Do you have children that participate in Bismarck Youth Baseball? _____

If Yes, what age(s): _____

Previous/Current youth involvement (i.e., coaching, teaching, organizations):

Community Affiliations (clubs, church, service organizations, etc):

SKILLS:

Please describe the skills, education and/or experience that you could bring to BYB:

INVOLVEMENT:

Are you willing to commit to attending monthly Board Meetings (typically no meetings May – July): Yes: No:

Are you willing to commit to attending and participating at various Bismarck Youth Baseball sponsored events throughout the year? This includes travel try-outs, division skills evaluations, equipment/uniform distribution/return, tournaments, etc.

Yes: No:

Do you have a specific area, age, and/or division you are particularly interested in being involved with? (please specify)

Comments:

OTHER:

Please describe the reasons you wish to be involved in Bismarck Youth Baseball and why you desire to join the Board of Directors. Additionally explain the contributions you will be able to make to Bismarck Youth baseball (use additional pages if more space is needed).

PRIVACY POLICY:

Please be advised that the information you provide on this application will be distributed to current and active Bismarck Youth Baseball Board members only.

SIGNATURE:

I hereby swear and attest that all information provided on this application is full and accurate to the fullest extent of my knowledge. I agree to submit to a background check if selected to serve on the BYB Board.

Signature: _____

Date: _____