



President
Karen Tadross

Vice President
Justin Brannan

Board of Directors
Andrew Gounardes
Chandra Hira
Jeff Samaha
Thomas Perone

Application for Board Membership

Date _____

General Information:

Name _____

Address _____

Phone _____ **E-mail** _____

Occupation _____

Statement of Interest:

Why do you want serve on the Board of Directors of Bay Ridge Cares?

How do you feel Bay Ridge Cares would benefit from your involvement on the Board of Directors?

Professional and Personal Skills:

Please check the areas of expertise that you feel you possess to further the mission of Bay Ridge Cares:

Fundraising

Communications

Event Planning

Accounting/Financial

Volunteer Coordination

Grants Administration

Please list any other skills or experiences that you believe can be helpful to supporting Bay Ridge Cares.

Serving on the Board:

As a neighborhood organization, we know that there are many different ways to make positive contributions to an organization, and that different people can be involved in different ways. The Board of Directors meets every month/other month/quarter, and conducts some work in committee between its regular meetings.

What type of time commitment can you realistically and reasonably dedicate to serve as a member of the Board of Directors? (There's no wrong answer!)

Thank you very much for your interest and your continued support!

Please send this completed application to:

**Bay Ridge Cares, Inc.
80 80th Street
Brooklyn, NY 11209**

Or you can email:

bayridgecares@gmail.com