

# Dayton Chamber Board Director Application

Name (First, Last): \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employment Sector:  
(Financial, Healthcare, etc.) \_\_\_\_\_

## Contact Information

Business Name/Address: \_\_\_\_\_  
*Home Address if Individual* \_\_\_\_\_  
\_\_\_\_\_

Phone Numbers:  
Work \_\_\_\_\_  
Home \_\_\_\_\_  
Mobile \_\_\_\_\_

Business Email: \_\_\_\_\_

Please state briefly why you are interested in joining the Chamber as a Board Director:

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Date

\_\_\_\_\_