

CACP Board of Directors Application

The Charlevoix Area Community Pool welcomes individuals interested in supporting this vibrant recreational facility to serve on its board of directors. The board is a working board that provides oversight of the pool. The all-volunteer board works together to achieve the pool's mission: to provide residents of surrounding communities with a wide range of aquatic programs that promote health, fitness, recreation and water safety.

Each board member is expected to be a working member of the team, to attend monthly meetings, to support the pool financially, and to be an active member of one or more of the following committees: Fundraising, Finance, Programs and Services, People and Governance, Marketing, and Building and Grounds.

Interested board candidates are urged to consider what contributions they could bring to the pool before filling out the attached board application. Skills might include: expertise in fundraising, business management, aquatic programs, marketing and communications, and community connections. Current board members are happy to answer any questions.

If the pool's mission and board responsibilities appeal to you, please fill out the attached application and send to info@charlevoixpool.org.

NOTE: If you would like to contribute to the pool's mission but are unable to commit the time and financial support required for a working board member, please consider joining the pool's advisory team which will meet quarterly throughout the year to provide feedback and recommendations to the board. Please contact the board in person or by email at: info@charlevoixpool.org.



Board of Directors Application

Name: _____

Phone: _____ [] Cell or [] Home Date: _____

Email: _____

Home Address: _____

City, State, Zip: _____ Do you live locally year round? Y N

Seasonal Address: _____

Education / formal: _____

Work experience: _____

Community/Volunteer experience: _____

CACP knowledge / use: _____

Why are you interested in serving on the CACP Board? _____

What skills/experience would you bring to CACP? _____

What are your particular interest areas in regards to serving on the CACP Board?

Please provide 3 references who can speak to your personal characteristics, skills and experiences:

1. Name: _____
Phone: _____ or Email: _____

2. Name: _____
Phone: _____ or Email: _____

3. Name: _____
Phone: _____ or Email: _____

Print Name: _____

Signature: _____

When complete, please send this Application to:
info@charlevoixpool.org or give to the Pool Manager at the Pool.

Note: This application does not imply we have a current Board Member opening but it will be included for consideration for future openings.