

Application for Board of Directors

Complete this digital application form, save and email it to **office@forestmoontheater.org** as an attachment, along with a separate resume that includes names and contact information for references; or print the documents and mail them to this address:

Forest Moon Theater 321 Stone Monument Dr. Wake Forest, NC 27587

Date:	Name:										
Mailing Address:											
		Cell Phone:									
Email Address:											
Occupation:		Employer:									
Explain your interest in serving on the Forest Moon Theater's board of directors:											
Describe any prior involvement with Forest Moon Theater:											
List your experience wo	orking with other nonprofit a	arts or theater organizations, if any:									

What e	experience do you bring as a Forest Moor	n The	ater bo	ard member? Mar	k al	l tha	at apply	y:				
	☐ Financial Management			Event/Program Development								
	☐ Fundraising			Human Resources/Personnel								
	□ Nonprofit Governance			Theater Programming/Management								
	☐ Technical Theater Management			Communications/Public Relations								
	Connections to Business Community		Other (use space	bel	low	to desc	ribe):	:				
Requi	rements for Membership											
To qualify, Forest Moon Theater board members must be residents of Wake Forest, NC or its												
surrounding communities (including Raleigh). Members serve a two-year term and may be re-												
elected. Additionally, board members conduct much of the work for the theater. We expect that each board member will participate in a variety of activities to ensure the success of the theater.												
	oard member will participate in a variet t activities would you be willing to parti	-							er.			
Wiia	Planning/managing fundraising events	cipac	.c us u i	orese moon mean		Jour	a mem	DCI.				
	Attending events as a Forest Moon Thea	ater r	represe	ntative								
	Grant research and development Major donor solicitation											
	Serve in a production (mark all below t		-									
	Director ☐ Stage Manager		,	ical Director		Set	Design	er				
			Prop A		J							
	Concessions Manager		•		, ,							
	Publicity Manger			eer Coordinator		DOX	Corricc	maric	4501			
				eer coordinator								
	Circi (describe).											
	e expectation that Forest Moon Theater			• •								
	lents. This includes attending 80% of all rresponding by email. Are you prepared			· · · · ·		phoi	ne conf	erenc	es,			
	Yes Not at this time, but keep					-tor	m proi	octs				
	res — Not at this time, but keep) IIIC	111 1111110	i ioi tatei oi ioi si	1101	(61	ili pioj	ects				
D : 1												
Disclo												
Have you ever been convicted of a felony?							Yes		No			
Have you ever been required to register on the National Sex Offenders list? \Box Yes \Box N								No				
Are yo	Are you willing to submit to a security background check? (If you are											
working with or around children participating with the theater, this is												
manda	tory.) If completing this form digitally, you	may ty	pe your n	ame below instead of sign	ing.	Ц	Yes		No			
Signatı	ıre:			Date:								