



## EDINA GIRLS ATHLETIC ASSOCIATION BOARD OF DIRECTORS APPLICATION

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Children names and ages \_\_\_\_\_

Tell us why you want to join the EGAA board.

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Describe relevant experience and/or areas of community involvement.

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## EDINA GIRLS ATHLETIC ASSOCIATION BOARD OF DIRECTORS APPLICATION

What specific talents/skills would you bring to the EGAA Board? Check all that apply:

- ☐ Financial/analytics
- ☐ Program Management
- ☐ Communications
- ☐ Website/Tech
- ☐ Organization
- ☐ Community Building
- ☐ Board Leadership
- ☐ Other, please describe below:

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Please submit completed application to EGAA President, Karla Venell at [karla.venell@venell.com](mailto:karla.venell@venell.com).