



Together ... People & Horses
Challenge ♦ Strengthen ♦ Inspire

Mailing Address
PO Box 1250
Niles, MI 49120
(269) 429-0671
www.tecfarm.org
info@tecfarm.org



Board Membership Application

Name: _____ Date of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Employment: _____

Currently Employed: Yes No

If yes, Place of Employment: _____

Position Held: _____ Work Phone: _____

Current TEC Association

Are you currently a volunteer at TEC? Yes No

Do you have a family member/friend who rides and/or volunteers at TEC? Yes No

Education

Educational: High School Graduate College Degree _____

Do you hold any special degrees or licensing that would be an asset to TEC?
(please describe below or attach separate sheet)

Experience

1. Horse experience (please describe below or attach separate sheet):



2. Experience working with people with special needs (please describe below or attach separate sheet):

3. Professional experience (please describe below or attach separate sheet):

4. Community & professional involvement (please describe below or attach separate sheet):

Areas of specialization:

- | | | |
|---|--|--|
| <input type="checkbox"/> Horse Care | <input type="checkbox"/> Insurance | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Working with People with Special Needs | <input type="checkbox"/> Human Resources | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Leadership | <input type="checkbox"/> Facilities Management | <input type="checkbox"/> Journalism |
| <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Medical/Therapist | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Business Management | <input type="checkbox"/> Education | <input type="checkbox"/> Computer Systems |
| <input type="checkbox"/> Finance/Accounting | <input type="checkbox"/> Grants Writing/Research | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Fundraising | _____ |
| | <input type="checkbox"/> Public Relations | |

Any Additional Information: