



**Ephrata Chamber of Commerce**

**I'M INTERESTED IN  
JOINING THE BOARD**

**112 Basin Street Ephrata WA 98823**  
**Phone: (509) 754-4656 | Fax: (509) xxx-xxxx**  
[ephratawachamber@gmail.com](mailto:ephratawachamber@gmail.com)

Thank you for your interest in serving on the Board of Directors for the Ephrata Chamber of Commerce. Please complete this form that will help us learn a little more about you. This does not guarantee your nomination, but if chosen, we want to offer you a rewarding opportunity and make the most of your expertise and special talents.

Name: \_\_\_\_\_

Business Title / Affiliation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please check the education / skills you will bring to the board:

- |   |   |
|---|---|
| <input type="checkbox"/> Accounting / Financial   | <input type="checkbox"/> Management                 |
| <input type="checkbox"/> Marketing / Communications   | <input type="checkbox"/> Strategic Planning         |
| <input type="checkbox"/> Fundraising  | <input type="checkbox"/> Special Events             |
| <input type="checkbox"/> Government Affairs   | <input type="checkbox"/> Training / Education       |
| <input type="checkbox"/> Program Development  | <input type="checkbox"/> Small Business Development |
| <input type="checkbox"/> Specific Business Sectors (Retail, Tourism, Manufacturing, Etc.) _____ |   |
| <input type="checkbox"/> Other: _____   |   |

How long have you lived in the Ephrata area? \_\_\_\_\_

In 100 words or less, please tell us why you would like to become a Ephrata Chamber of Commerce Board Member. What do you feel you will bring to the board? What ideas/thoughts do you have that would improve or enhance the Ephrata Chamber?