

South Dakota Junior Hereford Association (SDJHA) Officer and Director Application

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

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Age as of July 1, current year: \_\_\_\_\_

Number of years you have been a SDJHA member: \_\_\_\_\_

Desired Position:

- President
- President Elect
- Secretary
- Treasurer
- Reporter
- Director (3 positions available)

Have you held a leadership position with the SDJHA before?  Yes  No

If yes, what position was held. \_\_\_\_\_

If elected, would you be able to attend officer meetings?  Yes  No

If elected, would you be able to attend general meetings?  Yes  No

If No, please list any conflicts or involvements you will have throughout the next SDJHA year including other clubs, sports, theatre, etc.:

What leadership positions have you previously held?

What are some of your hobbies or interests?

What could you contribute to the SDJHA Board of Directors?

What new ideas do you plan to contribute to the SDJHA.

ACCEPTANCE OF RESPONSIBILITY AND PARENTAL CONSENT

I, \_\_\_\_\_, am willing to commit my time and effort to the South Dakota Junior Hereford Association if elected as an Officer or Director. I also certify that the information provided in this application is accurate and that I am the author of the answers provided which are true and of the utmost sincerity.

Member Signature: \_\_\_\_\_

I hereby give consent for \_\_\_\_\_ to run for a position on the Board of Directors of the South Dakota Junior Hereford Association. I also give consent for he/she to commit the necessary time and effort to make the South Hereford Association a success if he/ she is elected to the Board of Directors.

Parent Signature: \_\_\_\_\_ Email: \_\_\_\_\_

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

Parent Address: \_\_\_\_\_

Parent Phone Number: \_\_\_\_\_