

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: _____