

**Greater Buffalo Sports Hall of Fame
APPLICATION FOR BOARD OF DIRECTORS**

By submission of this application you affirm that you can:

- Attend board meetings of the Organization (currently on Thursdays @ 5:30 PM) (Y/N)
- Attend other functions of the Board including press conferences, committee meetings and other duties deemed necessary by the president. (Y/N)

(Please Print or Type All Information)

NAME _____

MAILING ADDRESS _____

BUSINESS PHONE _____

HOME PHONE _____

CELL PHONE _____

FAX # _____

E-MAIL _____

PRESENT EMPLOYER, IF ANY _____

HOW DID YOU HEAR ABOUT THE HALL OF FAME?

BRIEFLY LIST ANY OF YOUR ACCOMPLISHMENTS/SKILLS WHICH YOU FEEL ARE RELEVANT OR SIGNIFICANT TO BEING A MEMBER OF THE HALL OF FAME BOARD OF DIRECTORS (WHAT CAN YOU ADD/CONTRIBUTE TO THE BOARD?):

By my signature, I hereby agree to have my name placed for consideration to serve on the Board of Directors of the Greater Buffalo Sports Hall of Fame.

Signature

Date

Complete this form and mail to:
Greater Buffalo Sports HOF
PO Box 608
Buffalo, NY 14205