

Ride With Pride Board Candidate Biography Form

Name:

Address:

Telephone Number:

Email Address:

Certifications or Professional degree(s) you have obtained that are related to the medical, equine, special needs industry:

Please list all other Certifications or Professional degrees:

Please list any past leadership experience with volunteers and any participation in or leadership roles in organizations, conferences and seminars, and other like experiences.

Please list any additional accomplishments or skills you can bring as a Board Member.

Please rank the committees based on your interest to serve on them (All board members must serve on at least one committee.):

_____ **Sponsorship**

_____ **Events**

_____ **Marketing**

Please return application to: info@ridewithprideva.org