



62 Frederick Street, Unit 33 Dracut, MA 01826
salemunitedinc@gmail.com

Membership Application

Date: _____

Name: _____
 First M.I. Last

Address: _____

Phone: _____ E-mail : _____

Employer (Present)

Business Name _____ Type of Business _____

Your title _____

Address _____

Phone _____ E-mail _____

Primary service(s) and area/population served _____

****Use additional Sheet for more employment***

Preferred method of contact: () Phone _____ () Email _____

Please list boards and committees you serve or served on (business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization

Role/Title

Dates of Service

Education/Training/Certificates

Optional – Have you received any awards or honors that you’d like to mention?

How do you feel your Organizational experience would benefit from your involvement on the Board?

BUSINESS OR ORGANIZATIONAL REFERENCES

Business Name _____ *Type of Business* _____

Contact Person: _____

Address _____

Phone _____ *E-mail* _____

Business Name _____ Type of Business _____

Contact Person: _____

Address _____

Phone _____ E-mail _____

Skills, experience and interests: (Please circle all that apply)

Finance, accounting
Administration, management
Community service
Program evaluation
Education, instruction
Grant writing
Outreach, advocacy

Personnel, human resources
Non-profit experience
Policy development
Public relations, communications
Special events
Fundraising
Other: _____

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of (name of org).

Please tell us anything else you'd like to share.

Salem United, c/o Doreen Wade, President, 62 Frederick Street, Unit 33, Dracut, MA 01826
salemunitdinc@gmail.com

***Note: Please return this application to the above address or email above**