



BOARD MEMBER NOMINATION FORM

Please refer to the CKNS board member descriptions for specific board member duties and the general duties expected of all board members. Board members generally serve a term of two years. All nominees must be a current member of CKNS.

Full name: _____

Email: _____

Phone: _____

Address: _____

POSITION TITLE *check one:*

- | | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> President | <input type="checkbox"/> Canoe Development | <input type="checkbox"/> Promotions |
| <input type="checkbox"/> Vice President | <input type="checkbox"/> Kayak Development | <input type="checkbox"/> Mapping |
| <input type="checkbox"/> Treasurer | <input type="checkbox"/> SUP Development | <input type="checkbox"/> Environment |
| <input type="checkbox"/> Secretary | <input type="checkbox"/> Member at Large | |

List experience and skills related to the position:

How will you support CKNS?