

Kenosha Area
Family and Aging Services, Inc.

7730 Sheridan Road, Kenosha, WI 53143
Phone: (262) 658-3508 Fax: (262) 658-2263 Email: kafasi@tds.net

BOARD OF DIRECTORS
Nomination for Membership

Nominee's Name: _____

Home Address: _____

Home Phone: _____ **# of Years Residing
in Kenosha County:** _____

Occupation: _____

Employed by: _____

Business Address: _____

Business Phone: _____ **Email:** _____

Current Membership on other Boards or Advisory Committees:

Previous Board or Advisory Committee Experience:

Other Volunteer Experience:

Other Community Activities (Clubs, Political Offices, Etc.):

Special Skills or Qualities That Will be Brought to Board of Directors:

Nominated by: _____ **Date:** _____