

THE TRIANGLE CLUB, INC.

702 Lakeshore Circle
Atlanta, GA 30324

BOARD OF DIRECTORS APPLICATION

PERSONAL INFORMATION –

NAME _____

ADDRESS _____

HOME PHONE _____

WORK PHONE _____

CELL PHONE _____

EMAIL ADDRESS _____

EDUCATION/EXPERIENCE –

CIVIC ORGANIZATIONS OR SOCIAL CLUBS –

WHAT SPECIALIZED TALENTS OR EXPERIENCE I WOULD BRING TO THE BOARD –

WHY I WOULD LIKE TO SERVE ON THE BOARD –

PLEASE EMAIL ANY QUESTIONS AND YOUR APPLICATION TO contact@triangleclubatlanta.org THANKS!
