

Advisory Board Member Application

Please complete this form and return by email or mail to:

Queensbury Theatre
12777 Queensbury Lane
Houston, TX 77024
ksullivan@queensburytheatre.org

QUEENSBURY ADVISORY BOARD

This board is made up of individuals with a passion for the arts in this community who wish to support Queensbury Theatre and the Tribble School without the larger responsibility and time commitment of the fully elected board.

Advisory Board members are elected for an annual service - from January to December - and are invited to attend one annual board meeting in January with the full elected directors. Beyond this, the commitment is one of a social and networking nature, with members joining us for events throughout the year where they can share, with other Advisory members, a love of the arts, and a desire to support the ongoing programming of Queensbury Theatre and the Tribble School!

Full Name: ______

Home Address: ______

Email: ______

	Phone Number:
	Date of Birth:
Cont	nimum \$500 Annual Qualifying Contribution is required to join the QT Advisory Board. ributions can be made by check - made out to "Queensbury Theatre" and mailed to the dress above, or can be made by credit card. To make your qualifying contribution by credit card, please fill out the information requested below:

Credit Card Number: ______

Billing Zip Code: ______CVV: _____ Expiration Date: _____

EMPLOYMENT



If currently employed, please list the following:

• Employer Name:
• Industry:
• Title/Position:
Work Address:
• Work Phone:
• Work Email:
• Name of Assistant:
• Years in this Position:
COMMUNICATION
Where do you prefer to receive email? Work Home
Where do you prefer to receive mail? Work Home
Where do you prefer to receive calls? Home Cell
PLEASE ANSWER THE FOLLOWING:
1. Why are you interested in serving as an Advisory Board member?
2. What experience do you hope to gain?
4. Have you served or do you serve on any other boards - if so, please list: