



# RED WING BASKETBALL ASSOCIATION BOARD APPLICATION

This application will be distributed only to current RWBA Board Members for review. Please complete it thoroughly. Board members may consider current needs of the board, this applicaiton, and board member feedback when voting for approval.

## PERSONAL INFORMATION

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

## INVOLVEMENT

Do you have any past, present or future children playing RW Youth Basketball? List boy/girl & grade(s):  
\_\_\_\_\_

In what capacity have you worked with youth sports organizations in the past, or currently? Please list the organization/s, how long, and your role/s (if applicable)  
\_\_\_\_\_

## VOLUNTEER INTERESTS

**Which specific role(s) would you be interested in helping with?**

- |  |   |
|--|---|
| <input type="checkbox"/> Executive (President, VP, Secretary, Treasurer) | <input type="checkbox"/> Administrative Coordinator (Registration, etc)         |
| <input type="checkbox"/> K-6 Youth & Development Coordinator             | <input type="checkbox"/> Tournament Coordinator (Home & Summer 3vs3)            |
| <input type="checkbox"/> Equipment Coordinator (jerseys, coach supplies) | <input type="checkbox"/> Scheduling Coordinator (gym & tournament reservations) |
| <input type="checkbox"/> Marketing & Fundraising Coordinator             | <input type="checkbox"/> Other _____  |

**Would you be available for (check all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> At least 9/12 monthly board meetings- weekday evenings | <input type="checkbox"/> 1 Boys & 1 Girls home tournament: 7AM~5PM   |
| <input type="checkbox"/> Occasional extra committee meetings- time TBD          | <input type="checkbox"/> Summer Activities (3v3 league weekdays or River City Days 3v3 tournament weekend) |
| <input type="checkbox"/> Before school open gym supervision (Winter)            | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> K-3 Saturday morning Youth Program (Nov/Dec)           |  |

## PERSONAL EXPERIENCE

**Please rate your level of experience with the following:**

\*\*For areas you rated 3-5, please list any positions, roles or successes that support your rating.

**1 = No experience   2 = Limited experience   3 = Some experience   4 = Strong experience   5 = Professional / expert level**

Leadership / Team Management: 1 2 3 4 5 \_\_\_\_\_

Event Planning / Tournament Coordination 1 2 3 4 5 \_\_\_\_\_

Scheduling / Logistics 1 2 3 4 5 \_\_\_\_\_

Youth Development / Coaching 1 2 3 4 5 \_\_\_\_\_

Budgeting / Financial Oversight 1 2 3 4 5 \_\_\_\_\_

Fundraising / Sponsorships 1 2 3 4 5 \_\_\_\_\_

Technology / Data Management 1 2 3 4 5 \_\_\_\_\_

Marketing / Communication / Social Media 1 2 3 4 5 \_\_\_\_\_

Community Networking 1 2 3 4 5 \_\_\_\_\_

## SHORT RESPONSE

**Why are you interested in helping the youth basketball program?**

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**Are there any problems you perceive that you could help the board solve or improve?**

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### ALIGN EXPECTATIONS

If selected, will you be committed to the time required to serve as an active member with this Board? Service often involves in person attendance at sometimes lengthy meetings on nights and/or weekends. Service can include planning, organization, reporting, physical labor, and attendance of games that your personal child is not involved in. YES \_\_\_\_\_ NO \_\_\_\_\_

If selected, are you committed to carry out functions as determined and assigned by the Board in the manner as to which the Board assigned the functions? YES \_\_\_\_\_ NO \_\_\_\_\_

If selected, you will represent ALL RWBA families and players. Every idea you express, suggestion you make, or vote you cast should consider ALL of those participants and how they will be impacted. Do you clearly understand that service on this Board may not be influenced by any outside consideration and may not always serve your personal best interests? YES \_\_\_\_\_ NO \_\_\_\_\_

Functions of the RWBA Board of Directors can often include a discussion of sensitive information that cannot be shared or discussed with those not on the Board, including family members. Failure to respect sensitive information could result in termination of your board appointment. If selected, do you have enough personal integrity to agree to serve with the appropriate discretion around such matters? YES \_\_\_\_\_ NO \_\_\_\_\_

If found that you participated in conduct unbecoming of the Board and/or participated in conduct detrimental to RWBA, you will accept the immediate termination of your position, if the Board decides it to be necessary (taking no action against the Board or RWBA). YES \_\_\_\_\_ NO \_\_\_\_\_

Are you committed to maintaining a system of fair processes for ALL participants, without bias or consideration toward any person or organization other than those you are seeking to serve at RWBA? YES \_\_\_\_\_ NO \_\_\_\_\_

By signing below, I hereby agree that I have answered all of the questions truthfully and to the best of my ability. I also acknowledge that I am volunteering for a position with no expectation of compensation in any form.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signed Name \_\_\_\_\_