



Oklahoma City Ballet

Associate Board Application Form

2024-2025

Name: _____ DOB: _____
Month/Day/Year (optional)

Address: _____

City/State/Zip: _____

Phone: (Primary) _____ Email: _____

Social Media Handles:

Facebook: _____ X (Twitter): _____

Instagram: _____ TikTok: _____

Diversity Factors

(*This information will be used to add diversity to the Board's composition and to be inclusive of all persons. This information would be helpful but is not required.)

*Gender: _____ *Preferred Pronouns: _____ *Race: _____

Occupation: _____ Company Name: _____

Other Organizational Affiliations: _____

Area(s) of expertise which would be of benefit to the Board (please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Academic | <input type="checkbox"/> Leadership |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Client | <input type="checkbox"/> Medical |
| <input type="checkbox"/> Community Contacts & Relations | <input type="checkbox"/> Nonprofit Experience |
| <input type="checkbox"/> Corporate/Foundation | <input type="checkbox"/> Program Planning |
| <input type="checkbox"/> Financial Mgmt. | <input type="checkbox"/> Public Relations/Marketing |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Special Events Planning |
| <input type="checkbox"/> Grant-writing | <input type="checkbox"/> State/Govt. Affiliation |
| <input type="checkbox"/> HR/Personnel | <input type="checkbox"/> Volunteer Recruitment/Mgmt. |
| <input type="checkbox"/> Influencer | |

Other areas of expertise not listed:

I would be an asset to the OKC Ballet Associate Board because:

Thank you for the time and effort in completing this application form. Please return the completed form to an OKC Ballet Associate member or Jackie (jackie@okcballet.org) by July 31, 2024.