

**SELECTED INDEPENDENT FUNERAL HOMES
BOARD MEMBER APPLICATION – 2010-2012**



CANDIDATE NAME: _____
MEMBER FIRM: _____ GROUP # _____
ADDRESS: _____
CITY: _____ STATE/PROVINCE: _____
WORK PHONE: _____ CELL: _____
FAX: _____ EMAIL: _____

If requested, are you able to travel to Chicago for the meeting on August 4, 2009?
 YES NO *(Note: Selected will reimburse travel expenses.)*

Please provide details regarding your (or candidate's) qualifications and prior service in any leadership capacity of other organizations:

If you are nominating yourself, please list the most important reasons why you would like to serve on the Board of Directors of Selected Independent Funeral Homes:

Signature: _____ Date: _____
Name of Submitter: _____

*Please mail, fax or email completed application to Selected Independent Funeral Homes,
ATTN: Rob Paterkiewicz, no later than June 1, 2009.
Fax: 847-236-9968, Email: robp@selectedfuneralhomes.org*