



Board Member Candidate Application

Please complete and return to Yukon Chamber of Commerce, 10 W. Main, Ste 130, Yukon, OK 73099
Tel.: 405-354-3567, chamber@yukoncc.com

PRINT NAME: _____ Date: _____

Personal Contact Information:

HOME PHONE #: _____ CELL PHONE # _____

HOME FAX #: _____ HOME E-MAIL _____

RESIDENTIAL ADDRESS: _____

MAILING ADDRESS: _____

CITY _____ STATE: _____ ZIP CODE: _____

Business Information:

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY _____ STATE: _____ ZIP CODE: _____

BUSINESS PHONE #: _____ BUSINESS FAX #: _____

BUSINESS EMAIL: _____ WEB ADDRESS: _____

YOUR POSITION & TITLE: _____

WHICH EMAIL DO YOU PREFER TO RECEIVE CHAMBER NOTICES: HOME () BUSINESS ()

Educational/Professional Activities/Awards/Other Boards:

What is your definition of a Chamber of Commerce _____

Why do you want to be a Yukon Chamber Board member? (2-3 sentences) _____

Will you commit attend board meetings regularly? _____ Will you commit to attend special called meetings? _____

SIGNATURE: _____ DATE: _____

8/14/24