

## WST BOD or Committee Application – 2024 – 2025

Name:	Email address:		
Contact Phone Numbers:	(h)	(cell)	(w)
Place of Employment:			
WST Swimmer Names & Ages:			
# of years your family has been swir	nming at WST?		<del></del>
# of hours per week you could devot	te to board activities?		
Why are you interested in serving	on the WST Board of D	)irectors?	
Do you have any specialized area management, legal, human resour	. ,	<u> </u>	
What qualities/skills do you posse	ess that would be valua	ble as a member of the WS	ST board?
What particular area of interest do	you have in terms of the	he operation of the club?	

Have you served as a board member for any other non-profit or athletic organizations? If so, please list the name of the organization, the years that you served & responsibilities. What is your background in swimming? Were you a swimmer? How long and through what level did you swim? (Note: no swimming experience is required to be considered)
In what volunteer capacity have you served WST in the past?
What would you identify as WST's greatest strength?
What would you identify as the area needing the most improvement?
If you could accomplish any specific thing during your tenure on the board, what would it be?
Is there any other information that you would like to provide regarding your interest in serving?

Please return to paul.warnagiris@winchesterswimteam.com