



## 5p- Society Board Member Application

- Full Name:  
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- Email Address:  
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- Mobile Phone Number:  
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- Mailing Address:  
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\_\_\_\_\_  
\_\_\_\_\_
- Are you a current member of the 5p- Society?  
[Yes/No]

Note: Membership is required for board positions. If not, please visit our website to join before applying.

Board members must actively contribute to at least one subcommittee. Please select one or more subcommittees you are interested in and explain why you are drawn to them, including any relevant skills, experiences, or resources you can bring (e.g., action-oriented efforts, goal-setting, or specific expertise).

Available Subcommittee: (Select at least one subcommittee)

- ☐ Marketing & Communications Committee (e.g., newsletters, social media, content creation, website management, fundraising strategies)
- ☐ Family Engagement & Outreach Committee (e.g., regional get-togethers, awareness week planning, membership engagement)
- ☐ Internal Operation Committee (e.g., budget, finance, strategic planning, board member recruitment)

☐ Conference Committee (e.g., recruiting host families, researching locations, logistics, planning, and execution)

Why are you interested in these subcommittee(s)? (Please provide a brief statement, your motivation, relevant background, and how you can contribute.)

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By submitting this application, I acknowledge and agree to the following requirements if selected as a board member:

- Mandatory participation in quarterly board meetings (two virtual in spring/fall, two in-person at the annual summer conference and one weekend in late January; travel flexibility required).
- Active contribution to at least one subcommittee.
- Meeting an annual fundraising goal of \$1,000 (through organized fundraisers, individual efforts, solicited donations, or personal contributions).
- Attendance and participation at the annual 5p- Society Conference (including tasks like setup, registration, merchandise sales, breakout sessions, childcare, etc.).
- Minimum 2-year commitment.
- Weekly time commitment of approximately 2 hours.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please email your completed application to Laura Castillo at [director@fivepminus.org](mailto:director@fivepminus.org).

We look forward to hearing from you!