



O'Fallon Chamber of Commerce & Industries
Board of Directors Application

Date: _____

Name: _____ Phone: _____

Organization: _____ Industry: _____

Relevant experience and/or employment

Why are you interested in our organization?

Area(s) of expertise/contribution you feel you can make:

Other volunteer commitments:

Please return this application and any other pertinent information by Friday,
October 18, 2024 to KDuck@OFallonChamber.org