

# **Aron Theatre Co-operative Inc. Board of Directors Application Form**

Thank you for your interest in being nominated for the Aron Theatre Co-operative Board. Serving on the board is a rewarding experience and an opportunity for personal and professional growth. Completing this form will help you understand the skills and time/resource commitments of this leadership position. You

may find it helpful to read through the entire application and Board Member Responsibilities before you begin filling it out.

## Please return the completed application by email to info@arontheatre.com

This application will be kept confidential and on file. Applications are used by the Board's Nominating Committee to identify and evaluate potential board candidates.

## Vision

Our vision is to transform the Aron Theatre into a sustainable cultural hub, open to everyone in our community.

#### Mission

Aron Theatre Co-operative is a not-for-profit business owned and controlled by its members. Co-op members participate actively in organizing and successfully running artistic and cultural events. The Co-operative will operate with a triple bottom line, ensuring financial viability, community responsibility, and environmental stewardship.

## **Purpose**

Aron Theatre Co-operative brings people together to enjoy movies, music and other events.

## Values and Principles

Aron Theatre Co-operative is guided by the International Co-operative Values and Principles.

A co-operative is an autonomous association of persons united voluntarily to meet their common economic, social, and cultural needs and aspirations through a jointly-owned and democratically-controlled enterprise.

## Values

Co-operatives are based on the values of self-help, self-responsibility, democracy, equality, equity and solidarity. In the tradition of their founders, co-operative members believe in the ethical values of honesty, openness, social responsibility and caring for others.

## **Principles**

The co-operative principles are guidelines by which co-operatives put their values into practice.

- 1. Voluntary and Open Membership
- 2. Democratic Member Control
- 3. Member Economic Participation
- 4. Autonomy and Independence

- 5. Education, Training and Information
- 6. Co-operation among Co-operatives
- 7. Concern for Community

## Membership

Are you a member of Aron Theatre Co-op? Yes No

## **Board Member Responsibilities**

- 1. Support the vision, mission, purpose and values of the Aron Theatre Co-op.
- 2. Serve a minimum of one year on the Board. Our board members have staggered terms of 1, 2 and 3 years.
- 3. Attend a minimum of six board meetings per year, for two hours at each meeting.
- 4. Make a commitment to participate actively in Aron Theatre Co-op work. The Co-op has a working board, and some directors chair a committee.
- 5. Stay informed about committee matters, prepare for meetings, and review and comment on minutes and reports.
- 6. Build a collegial working relationship with other volunteers and staff, contributing to consensus building.
- 7. Participate in the board's annual evaluation and planning efforts.
- 8. Participate in the advancement of the strategic plan including event organizing, fundraising and member recruitment.

Your name:
Your Home Phone Number:Cell number:
Your address:
City: Postal Code:
Your email address (please write it carefully):
Briefly describe why you would like to join our Board of Directors:
Your current organizational affiliations (names of the organization and your role(s):
1
2
3
4

Which of your skills would you like to utilize on the Board? Check those that apply:			
<ul> <li>□ Board development</li> <li>□ Strategic planning</li> <li>□ Staffing / HR</li> <li>□ Program development</li> </ul>	<ul><li>☐ Financial management</li><li>☐ Fundraising</li><li>☐ Evaluation</li><li>☐ Community networking</li></ul>	<ul> <li>□ Training</li> <li>□ Marketing</li> <li>□ Volunteer management</li> <li>□ Facilities management</li> </ul>	
Other skill(s) of yours that you	would like to utilize?		
What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?			
	e that you can provide at least 2-4s, and that you do not have any co	4 hours a month in attendance to onflict-of-interest in participating	
Your signature:		Date:	
	mber of the Board, or if you decidanization in various ways that ma		
□ Yes	□ No	□ Perhaps	