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Lady Butterflies State Advisory Board – Interest Form

Thank you for your interest in serving as a State Advisory Board Member with Lady Butterflies! Please complete the form below so we can learn more about you and how you'd like to serve.

Basic Information

Full Name: _____

Email Address: _____

Phone Number: _____

City & State: _____

Preferred Method of Contact (Email / Phone / Text): _____

Tell Us About You

Current Occupation and/or Affiliation:

Brief Bio or Background (2-3 sentences):

Why are you interested in serving as a State Advisory Board Member?

Your Areas of Interest (Check all that apply):

☐ Advocacy for Women

☐ Teen Mentoring & Leadership

☐ Support Group for Women

☐ Education, Career & Life Skills

☐ Fundraising & Sponsorships

☐ Community Outreach

☐ Event Planning

☐ Health & Wellness

☐ Other: _____

Availability

How much time can you realistically commit per month?

☐ 1-2 hours

☐ 3-5 hours

☐ 6+ hours

Are you available for quarterly virtual check-ins or advisory meetings?

☐ Yes ☐ No ☐ Maybe

Connection to Your Community

How would you help us expand Lady Butterflies' presence in your state/community?

Portfolio

Upload Resume or LinkedIn (if available): _____

Final Step

☐ I understand this is a non-governing, volunteer-based role and does not include voting or fiduciary responsibility.

Signature

Date