

**ALZHEIMER'S ASSOCIATION
NATIONAL CAPITAL AREA**

BOARD OF DIRECTOR'S VOLUNTARY AGREEMENT

I agree to:

1. Commit myself to actively support the chapter's Mission Statement, which is: to provide leadership to eliminate Alzheimer's disease through the advancement of research, while enhancing care and support services for individuals and their families.
2. Abide by the purpose and responsibilities of the Board of Directors as contained in the Board Member job description.
3. Serve on the Board for a minimum term of three years with no more than two consecutive three-year terms.
4. Be willing to accept a leadership role within the three-year term.
5. Attend and actively participate in all Board meetings and attend no fewer than three Board meetings annually.
6. Contribute or generate financial support on an annual basis. Make a personal contribution of \$500 and a commitment to impact the chapter's budget by \$5,000 annually in cash or chapter approved in-kind services.
7. Participate in and support the Chapter's fundraising special events and donor cultivation events.
8. Identify and recruit potential Board members and volunteers.
9. Act as an informed spokesperson in the community for the organization's programs, policies and practices.
10. Avoid, in fact and in perception, conflicts of interest as referred to in the Conflict of Interest Statement.

Signature

Date

Date Board service began