



## UMAP Board Interest Information Form

Name: \_\_\_\_\_

Name of Center: \_\_\_\_\_

Name Of Church: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

What area of interest do you have in serving on the board?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What special talents could you share with the board?

\_\_\_\_\_

\_\_\_\_\_

Thank you for expressing interest in being a part of the UMAP board. Someone from the board will contact you. Please prayer fully consider your possible calling.

Please send your information to:

UMAP Board

P O Box 07506

Fort Myers, FL 33919