



**Lowndes/Valdosta Arts Commission, Inc.
New Board Member Nomination Form – 2025-2026**

Nomination submitted by: _____ Date: _____

Phone(s): _____ Email: _____

Name of Nominee: _____

Address: _____

Phone(s): _____

Email: _____

Reasons why this person would be an asset to our Board: _____

When you informed your candidate about the required attendance of monthly Board meetings, TCA events and support of the LVAC mission, what was his/her response?

Please list any additional helpful information about this individual (interests, background, strengths, talents, hobbies, community involvement, other Boards served on, etc.):

Thank you for your nominations. Please email by March 17, 2025 to Lisa Posas, Chair, Governance/Nominating Committee, to ldposas1@aol.com.

Name: _____



Lowndes/Valdosta Arts Commission, Inc. (LVAC)
Annette Howell Turner Center for the Arts
Prospective New Members' Information Handout

Mission Statement: The mission of Lowndes/Valdosta Arts Commission, Inc. (LVAC) is to promote and celebrate the arts as the regional center for cultural enrichment, education and entertainment.

Requirements of Board Members

1. Maintain annual membership in LVAC.
2. Purchase at least one ticket to each Spring Into Art Gala and Presenter Series Season and/or support the Turner Center (TCA) by financial commitments from self or others or through in-kind services.
3. Attend regular called Board meetings (regular meetings are held on the fourth Monday of January – May, August – November). Usual meeting time is 5:15 p.m. for one hour.
 - Attendance at Board meetings is mandatory.
 - Members may be excused from up to three meetings per year with a valid excuse. Excused absences can be: personal or family illness/emergency, work conflict or out of town.
4. Show support for Turner Center by attending Center receptions, performances, and special events.
5. Serve on at least one Board committee.
6. Following election, attend a new member orientation session prior to the August Board meeting.

NOTE: Any exceptions to this Board membership support list must be approved by the President of the Board.

Areas of expertise/contributions you feel you can make:

- | | | |
|---|--|---|
| <input type="checkbox"/> Artistic Practice | <input type="checkbox"/> Financial Management | <input type="checkbox"/> Philanthropy |
| <input type="checkbox"/> Business Skills | <input type="checkbox"/> Government Relations | <input type="checkbox"/> Leadership |
| <input type="checkbox"/> Human Resources Management | <input type="checkbox"/> Non-Profit Management | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Arts Education |
| <input type="checkbox"/> Other _____ | | |