



DISCOVERY

Early Learning & Care

Board Member Application

Version: March 2026

DiscoveryCare.ca



Application to join the Board of Directors

Name (First, Last): _____

Date: _____

Home Address: _____

Telephone (Home): _____

Telephone (Cell): _____

Email Address: _____

Other Contact: _____

Info: _____

Question 1. How did you hear about the Board of Directors at Discovery Early Learning & Care?

Question 2. What aspects of our service are you interested in and/or involved in currently?

Continued Application to join the Board of Directors

Question 3. Why do you want to be a Board Member at Discovery Early Learning & Care?

Question 4. What will you bring to the Board of Directors?

Signature of Applicant: _____

Date: _____

Please submit your application and resume directly to: chair@discoverycare.ca or hand it in to any of our Leadership Team members at our various sites. For site information, visit discoverycare.ca/contact