

Miami-Dade and The Keys Intergroup (MDKIG) - Consent to Serve

Submit to Miami-Dade and The Keys Intergroup no later than January elections. Use additional pages if needed.

Position desired: _____Chairperson _____Vice Chairperson _____Secretary _____Treasurer

Name_____ Email _____ Phone _____

Address_____

City_____ State_____ Zip_____

Years in OA _____ Current OA Position (if applicable)_____

1. Brief account of your OA story:

2. Summary of OA service including any service beyond the group level:

3. Business, professional skills or other experience and skills related to the position:

4. Why do you want this position?

Signature_____ Date_____