



The Imperial Court of All Alaska  
The NorthStar Empire of Imperial Courts, Inc., AK#44862-D

## BOARD OF DIRECTORS APPLICATION

### Seats: 2017 and 2018 Fiscal Years

Dear Valued Court Members:

The Bylaws of the ICOAA require us to fill five Board of Director seats that will be vacated at the end of the 2016 fiscal year.

The term of a Director is two years, meetings are held once a month (currently scheduled on 2nd Tuesdays) but can be called by the President of the Board at any such time is required.

Please take this opportunity to apply for one of these available seats. If you are interested in serving on our Board of Directors, please download, fill out, and bring this application, along with a short written letter of intent as to why you would like to serve on the Board of Directors of the Imperial Court of All Alaska, to the Board of Director's Annual Meeting at 6 PM on February 7, 2017, at Mad Myrna's. Candidates will be vetted at that meeting, and selection for the available seats will be determined by vote of the general membership present at that meeting.

This meeting and your membership is important to this organization, and your presence is always encouraged at all meetings!

All applicants must:

- Be at least 21 years of age, and be a member in good standing with the Community and with the ICOAA
- Provide current proof of Alaskan residency for a period of no less than one year prior to December 31, 2016
- Be prepared to commit to at least 10 hours per month for various Board- and Court-related activities.

To be considered for candidacy, you must bring your completed application and letter of intent to the Annual Board Meeting of the ICOAA at 6 PM on Tuesday, February 7, 2017 at Mad Myrna's (530 E 5th Avenue)  
No proxies will be accepted

Name: \_\_\_\_\_ \*\* Phone: \_\_\_\_\_

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

**\*\* I UNDERSTAND THAT THE NORTHSTAR EMPIRE OF IMPERIAL COURTS, INC.,  
dba THE IMPERIAL COURT OF ALL ALASKA  
HAS THE RIGHT TO RUN A BACKGROUND CHECK ON ME AT ANY TIME.  
I MAY BE ASKED TO PROVIDE MY SOCIAL SECURITY NUMBER FOR THIS PURPOSE.**

Signed: \*\* \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions regarding the application and/or election process,  
please contact Vice President Trevor Council at [icoavp@gmail.com](mailto:icoavp@gmail.com)