



Office: 361-798-2662

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DIRECTORS COMMITMENT FORM

I understand and subscribe that I will be required to attend the Chamber activities held by the Hallettsville Chamber of Commerce & Agriculture during my tenure as a 2025 board member of the Hallettsville Chamber of Commerce & Agriculture.

- I agree to hold confidential all information entrusted to me regarding the Hallettsville Chamber of Commerce & Agriculture.
- I agree to promote Hallettsville, Lavaca County, and its quality of life.
- I agree to attend and be an active participant in the Hallettsville Chamber of Commerce Strategic Planning.
- I understand that I am required to serve on two (2) of the chamber's committees and help with other Chamber events as needed.
- I agree to attend and participate in the fundraisers of the Hallettsville Chamber of Commerce & Agriculture.
- I agree to attend Ribbon Cuttings (when possible) and other special ceremonies in association with the Hallettsville Chamber of Commerce & Agriculture.
- I understand per the Hallettsville Chamber of Commerce & Agriculture By-Laws that if I am absent for more than four (4) board meetings during the calendar year, I will automatically forfeit my seat on the Board of Directors (unless confined by illness or otherwise decreed by majority vote of those at any meeting thereof).

Printed Name:		
Signature:		
Date:		