



2021 Membership Form

2021 Meetings: March 9 | June 8 | September 8 | November 9

Meetings begin with a social gathering at 5:30 p.m., where registration and nominations occur. The business portion begins at 6:00 p.m. and concludes at 7 p.m. Meetings are held at Golf Club of Indiana and Ulen Country Club.



Members donate \$100 - \$1,000 annually. Of that donation, based on member type, a portion supports the Women’s Fund Endowment at the Community Foundation of Boone County. The remaining amount is distributed quarterly to nonprofits selected by the members. One organization is selected at each quarterly meeting. Members agree to honor their commitment even if they are not present at a meeting, their charity was not chosen, and/or they are not in favor of the organization chosen.

Membership Options:

| General Member | Shared Member | Associate Member | Corporate Member |
|--|---|---|---|
| \$500 annual commitment <ul style="list-style-type: none"> • \$100 to endowment • \$100 each quarter • Able to sponsor associate member(s) | \$250 annual commitment <ul style="list-style-type: none"> • \$50 to endowment • \$50 each quarter • Must join with partner determined • One vote per pair | \$100 annual commitment <ul style="list-style-type: none"> • \$20 to endowment • \$20 each quarter • Must be < 30 years old • General member can sponsor | \$1000 annual commitment <ul style="list-style-type: none"> • \$200 to endowment • \$200 each quarter • 8 attendees/meeting • 2 nominations/meeting • 2 votes/meeting |

I am a (circle one): New Member Renewing Member

Name: _____ Preferred First Name: _____

Address: _____

Phone: _____

Email: _____

I am joining as a/an:

- **General Member**

Name of Sponsored Under-30 Associate Member (if applicable): _____

- **Shared Member**

Name of Joint Member: _____

- **Associate Member (under age 30)**

Name of Sponsoring General Member (if applicable): _____

- **Corporate Member**

Name of Corporation: _____

By signing below, I am committing to contribute in 2021 based on my membership level chosen above to join the Women of Impact Boone County. This includes a contribution for the Women’s Fund endowment fund at the Community Foundation of Boone County plus four (4) quarterly contributions to the nonprofit organization chosen by the membership of the Women of Impact at each quarterly meeting. I agree to honor my commitment even if I am not in favor of the nonprofit organization chosen. If I choose to pay my membership on a quarterly basis and am unable to attend a meeting, I understand that my credit card will be charged for that quarter’s donation.

Signature

Date

Payment Options (select one):

- Pay the full annual membership fee amount online: www.communityfoundationbc.org
- Pay the full annual membership fee via this form. Complete details below & return form to us.
- Pay the full annual membership fee via check mailed to CFBC office. Address listed below.
- Pay quarterly online via website: www.communityfoundationbc.org

PAYMENT INFORMATION/CREDIT CARD AUTHORIZATION *(Card information MUST be completed if not paying in full):*

Name (EXACTLY as it appears on credit card): _____

Billing Address: _____

Phone: _____ Email _____

Membership Type: General Shared Associate Junior (HS Student) Corporate

Annual Membership Fees: \$500 for General; \$250 for Shared; \$100 for Associate; \$1000 for Corporate

If Paying Quarterly: (\$200/\$100/\$100/\$100 for General; \$100/\$50/\$50/\$50 for Shared; \$40/\$20/\$20/\$20 for Associate; \$400/\$200/\$200/\$200 for Corporate)

Amount of Gift: \$ _____

**Grant dollars from mid-year new memberships are disbursed to previous quarterly grantees. Membership can be pro-rated for mid-year new members, if desired.*

MC/Visa/AmEx# _____ Exp: _____ CVV: _____

Signature _____

PLEASE NOTE: Your signature authorizes CFBC staff to charge quarterly payments to this card for the current year 2-3 business days before each meeting (unless you have chosen to pay in full) EVEN IF YOU DO NOT ATTEND EVERY MEETING. If you have any changes to your payment information (card number, address, etc.), please contact us by one week prior to the next quarterly meeting.

