



Membership Form

Thank you for your interest in joining 100+ Women Who Care Sacramento Valley. Our members are making real changes in the lives of those living in the Sacramento Valley through our combined donations each quarter.

We meet four times a year on the first Wednesday of March, June, September, and December. Meeting times are 6:00 p.m. – 6:30 p.m. (mingling) and 6:30 p.m. - 7:30 p.m. (meeting).

Please complete the information below and bring it to the next meeting, or send it by fax to 916-497-0708, by mail to Roni Stover, 980 9th Street, Suite 2300, Sacramento, CA 95814, or by email to 100wwcsacvalley@gmail.com.

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

If you are applying for Emerging Member, please check here:

(Emerging members are age 30 and under and their quarterly contribution is only \$25 a meeting/\$100 a year.)

I am making a personal commitment to donate \$400 each year (\$100 at each quarterly meeting) to non-profit organizations serving the Sacramento Valley. I understand that even if the organization chosen is not my first choice, I will donate at each meeting. If I am not able to attend a meeting, I will give my check to another member to deliver to the meeting on my behalf, or I will mail deliver my check within 5 days after the meeting.

Signature

Date