



**WOMEN**  
**who care**  
*about Long Island*

## Membership Form

Name:

Address:

City, State, Zip:

E-Mail:

Phone:

With my signature below, I am pledging to participate in 100 Women Who Care about Long Island, and I am making a personal commitment to contribute \$400 each calendar year (\$100 quarterly) to local nonprofit organizations serving Nassau and Suffolk Counties. I agree to donate each quarter to the nonprofit organization selected by the group's majority vote. If I am unable to attend a quarterly meeting, I will send my check, which will serve as my proxy vote, with another attending member to deliver on my behalf.

Type of Membership:  Individual  2-Person Team

If joining as a 2-person team, please list the other team member below:

*Please note that each team member must complete a membership form.*

Other team member:

I understand that I am making a commitment to 100 Women Who Care about Long Island to make an annual donation of \$400 (\$100 donation at each of four quarterly meetings). If joining as a team, then this is a collective amount from the team. These donations will be made directly to local 501(c)(3) charities in Nassau and Suffolk Counties. I understand that even if I did not vote for the charity chosen by majority vote, I will fulfill my donation commitment. I also understand that if I am not able to attend a quarterly meeting, I will provide my check(s) to another member to deliver to the meeting, or mail to 100 Women Who Care about Long Island in advance of, or after, the meeting. I understand that I must be present to vote, but if I cannot attend and I send my check with another member, they can vote for me by proxy. My commitment will automatically renew, for successive one year periods, unless notice is given. Members can resign at any time. Agreeing to these terms is an honor pledge, not a legal agreement.

YES  NO

You have my permission to publish my contact information in our member directory

YES  NO

Signature

Date

**Please e-mail completed form to [membership@100wwcli.org](mailto:membership@100wwcli.org)**