

### Personal Information (Please print clearly.)

Name (as you prefer to be listed) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Members must be 21 or older) Preferred Phone ( \_\_\_\_\_ ) \_\_\_\_\_

### Membership Options (Check all that apply.)

**Become an Impact100 South Jersey voting member by donating \$1,150**  
*100% of your membership contribution is tax deductible. \$1,000 will be used to fund Impact100 South Jersey grants — \$150 will help cover Impact100 South Jersey administrative costs. Membership contributions are nonrefundable.*

**Give the gift of a voting membership to a female family member or friend.**

Recipient's full name and email address:

\_\_\_\_\_

**Contact me to discuss how I or my company can become a sponsor or contributor.**

**I would like to host an Impact100 South Jersey information session.**

**I'm interested in serving on the following committee(s):**

Grant Review Committees (We will train you!!!)

Finance

Events

PR/Communications

Membership

Data Management/Administrative Tasks

### Ways to Become A Member

- **Mail** membership form and check payable to *Impact100 South Jersey* to PO Box 844, Haddonfield, NJ 08033
- **Online** at [Impact100SJ.org/membership](http://Impact100SJ.org/membership)

**Confidentiality, Conflicts of Interest & Photo Release:** I understand that confidential information may be acquired as a result of my association with Impact100 South Jersey and that this information should not be disclosed. To insure a full transparent grant selection process, I will disclose to the Leadership Council any potential conflicts of interest I may have with grant applications. Membership implies permission for Impact100 South Jersey to use photographic, audiovisual and written works containing my image and name.

**I Agree With these Terms** Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**How did you hear about Impact100 South Jersey?** \_\_\_\_\_