



Membership Form

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phones Home: _____ Work: _____ Cell: _____

E-Mail: _____ Employer: _____

Tax acknowledgement name and address if different from above:

I wish to make my non-refundable annual contribution to Impact 100 Greater Indianapolis.* All contributions are due by December 31.

Method of gift: **Please circle:** check / credit card / gifted securities

Enclosed is my check for \$1,000 (\$1,000 minimum) made payable to: Impact 100 Greater Indianapolis.
Check # _____ (Mailing instructions below)

Note: If you would like to give "110%" i.e., \$1100, the extra \$100 would be greatly appreciated to help us cover administrative expenses of Impact.

I would like to give 110%. Enclosed is my check for \$1100 made payable to:
Impact 100 Greater Indianapolis. Check # _____

I prefer to use my credit card: Card type (Visa, MC, AMEX)
Credit card # _____ Expiration Date _____

I would like to give 110%. Please charge the above credit card for \$1100.

I prefer to contribute a gift of stock. (Please follow the directions for making a stock gift found in the **Join Impact > Donate Stock** section of our web site at www.impact100indy.org).

I wish to be designated a Friend of Impact 100 with my contribution of \$_____ (\$250 suggested donation). *I understand this gift does not provide me with voting rights and these funds will first be designated to cover administrative costs and, only at the discretion of the board of directors, will this money be included in a grant.

****Impact 100 Greater Indianapolis is a nonprofit, 501(c)(3) public charity, and donations are tax deductible to the extent allowed by law.***

Member Involvement:

Members may choose to play an active role in the grant proposal process by serving on a focus area committee. For anyone who chooses not to be on a committee, please know that your membership and participation in the final vote in June are just as important to us as those who volunteer additional time to Impact. At this time, I choose the following:

- I wish to serve on a committee. I understand that I will be contacted about my committee preference.
- I am unable to serve on a committee at this time.

Signed: _____ Date: _____

Mail to: Impact 100 Greater Indianapolis, P. O. Box 40531, Indianapolis, IN 46240.