

100 Women Who Care North Platte
c/o Mid-Nebraska Community Foundation
121 N. Dewey St. Suite 112
PO Box 1321
North Platte, NE 69103



Registration & Commitment Form

Commitment: With my signature below, I am agreeing that the information I provide below is accurate and true. I am pledging to participate in 100 Women Who Care North Platte, and I am making a personal commitment to contribute \$400 each calendar year (\$100 quarterly) to local nonprofit organizations serving the North Platte Area. 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 either send my check with another attending member to deliver on my behalf, mail it as requested after the meeting, or pay online, if that option is presented. I also acknowledge that photographs and videos taken at events and meetings may include my image and may be used in promotional materials for 100 Women Who Care North Platte.

I understand my personal contact information is strictly confidential and I understand it will not be shared or distributed to an outside third party without my expressed consent. If 100 Women Who Care North Platte chooses to publish a Membership Directory, I agree that my contact information be included in that directory. Yes___ No___

Member:

First Name _____ Address _____
Last Name _____ City _____ State _____ Zip _____
Best Phone Number _____ Email Address _____
Signature _____ Date _____

Completed Commitment Forms may be completed on www.100womennp.org or forms may be printed, completed, and turned in at a meeting. Should you wish to discontinue membership at any time after your four-time commitment, send notification in writing indicating your withdrawal. 100 Women Who Care North Platte; c/o Mid-Nebraska Community Foundation; 121 N. Dewey St. Suite 112; PO Box 1321 ; North Platte, NE 69103