

MEMBERSHIP for the 2019-2020 GRANT CYCLE

Full Name _____

Home Phone # (____) _____ Cell # (____) _____ Ok to message? _____

E-mail _____

Mailing Address _____

City _____ State _____ Zip _____

Impact 100 East Bay, Inc. is a California nonprofit organization. As a 501(c) (3) organization, we are recognized as a qualified public charity and contributions are fully tax-deductible under Section 170 of the Internal Revenue Code. Impact 100 East Bay, Inc. is also qualified to receive tax deductible bequests.

Our tax ID number is 81-3431763.

PARTICIPATION OPTIONS:

- Please contact me about my (my spouse's) company's matching gifts program.
- Yes, it is fine to post my name (no other info is listed) as a member on the website.
- Yes, I grant permission for photographs that may be taken of me at Impact 100 East Bay events to be published electronically and in print.
- I would like to participate on the committee(s) I've checked:
- | | | |
|---|---|---|
| <input type="checkbox"/> Grants &/or Financial Review | <input type="checkbox"/> Events | <input type="checkbox"/> Community Outreach |
| <input type="checkbox"/> Membership Recruiting | <input type="checkbox"/> Marketing & Communication | <input type="checkbox"/> Public Relations/Media |
| <input type="checkbox"/> Membership Engagement | <input type="checkbox"/> Grantee Liaison | <input type="checkbox"/> External Networking |
| <input type="checkbox"/> Sponsorship Development | <input type="checkbox"/> I'm not sure. Please call me to discuss. | |

COMMITMENT FOR 2019-2020 GRANT CYCLE

Donation Information & Membership Levels:

- Member** - \$1,000 donation; the entire donation is contributed to 2019-20 Grants Fund \$ 1,000.00
- Member Plus** - \$1,100+ donation; additional funds of \$100 or more will be fully tax-deductible and directly deposited into the general fund for our organizational operating costs, including website, technology, communication and administration. + _____
- My total contribution is (tax-deductible in year payments are made): \$ _____

Paying by check - Please mail this completed form with a check payable to:

Impact 100 East Bay, Inc. Membership Team P.O. Box 2889 Castro Valley, CA 94546-0889

Paying by credit card options: Complete and sign below.

Please Print Clearly

VISA Mastercard Discover American Express

*Note: 3.5% convenience fee applied to deter merchant transaction costs**

Card No. _____ Exp. Date ____/____/____ SIC _____ In Full

Name as shown on card: _____ Billing ZIP Code: _____ Installment

Authorized Signature: _____ Today's Date: _____

Installments (available for **Member Plus** Only): *Note charges will be posted between the 10th and 15th of the months selected below.* **Plan 1:** 4 installments of \$275 ea. **Plan 2:** 5 installments of \$220 ea. **Plan 3:** \$225 + 7 installments of \$125 ea.

Plan 4: \$200 + 9 installments of \$100 ea. **Plan 5:** \$300 + 4 installments of \$200 ea. **Plan 6:** 2 installments of \$550 ea.

Pick your months: November December January February March April May June July

You may also visit www.impact100eastbay.org and click on the

Participate & Become a Member
 page on our website to make your contribution.