



## MEMBERSHIP FORM

Thank you for your interest in **100 Women Who Care**. Please fill out the commitment form below and return it to me via email at [audade@yahoo.com](mailto:audade@yahoo.com) or mail to: Audrey Ades. 229 Blackbird Lane. Jupiter, FL 33458. You may also bring it to a meeting.

We meet four times a year. Meetings are held at **Temple Beth Am** in Jupiter. 2250 Central Blvd.

Pre-registration, Mingling/Networking will be from 5:30-6:00pm and meetings will run from 6:00-7:00 pm.

(Please Print)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

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

Telephone H: \_\_\_\_\_ W: \_\_\_\_\_ C: \_\_\_\_\_

E-mail \_\_\_\_\_

I understand that I am making a personal commitment to "100 Women Who Care" to make an annual donation of \$400.00 per year, \$100.00 per quarter to worthy causes, charities and non-profits serving Palm Beach County. I agree that, even if I am not fond of the charity chosen, I will still donate each quarter. I also understand that if I am not able to attend the quarterly meeting that I may give my check (which will also serve as my proxy vote) to another member to deliver on my behalf or send in the check as soon as I have been notified of the charity name.

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Date