100+ women who care south florida

MEMBERSHIP FORM

Thank you for your interest in the Jupiter/Tequesta chapter of ***100 Women Who Care.*** Please fill out the commitment form below and return it to me via email at

info@100womenwhocarejupitertequestachapter.com

We meet four times a year at **Temple Beth Am** in Jupiter. 2250 Central Blvd.
5:30-6:00: Pre-registration, mingling/networking
6:00-7:00: Meeting

(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 and Martin Counties. 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