**100 Women Who Care Conejo Valley**

**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 Conejo Valley, and I am making a personal commitment to contribute $400 each calendar year ($100 quarterly) to local nonprofit organizations serving the Conejo Valley region. 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 Conejo Valley.

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 Conejo Valley 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 ST Zip

Best Phone Number Email Address

Date Signature

Completed Commitment Forms may be scanned and sent via e-mail to info@100womenwhocareconejo.com or forms may be completed and turned in at a meeting or completed online at www.100womenwhocareconejo.com. (Should you wish to discontinue membership at any time after your four-time commitment, please send an e-mail to info@100womenwhocareconejo.com indicating your withdrawal.)