

100(+) Women Who Care Santa Fe

2-Member Team Commitment Form

Please Print:

Person 1

Name _____

Street Address _____

City, State & Zip _____

Telephone (H) _____ (W) _____ (C) _____

Email Address: _____

Please Print:

Person 2

Name _____

Street Address _____

City, State & Zip _____

Telephone (H) _____ (W) _____ (C) _____

Email Address: _____

We understand that I am making a commitment to **100+ Women Who Care – Santa Fe** to make an annual donation of \$400 – (\$50 per team member at each quarterly meeting) – given directly to local charities, non-profits and other worthy causes serving the Santa Fe area. We understand that even if we did not vote for the charity chosen by majority vote, we will fulfill my donation commitment. We also understand that if we are not able to attend a quarterly meeting that we will provide checks to either another member to deliver or mail in advance of the meeting. We understand that our team only has one vote at the meetings.

Person 1 Signature

Date

I agree to have my contact information included in the 100+ WWC Membership Directory; please check: Yes_____ No_____

Person 2 Signature

Date

I agree to have my contact information included in the 100+ WWC Membership Directory; please check: Yes_____ No_____

Completed **Commitment Forms** may be scanned and sent via e-mail to jodyville@yahoo.com or russtree@aol.com or forms may be completed and turned in at a meeting. Should you wish to discontinue membership at any time, please send an e-mail to the above address indicating your withdrawal.

The **100+ Women Who Care in Santa Fe** thank you for your support!