

Registration & Commitment Form

First Name:		Last Name:
Address:		Email:
City:		Phone Number:
Province:	Postal Code:	Date:
		Signature:
shared or distril Peterborough c	buted to an outside third par	ion is strictly confidential and I understand it will not be rty without my expressed consent. If 100 Women ership Directory, I agree that my contact information be

Commitment: With my signature, I am agreeing that the information I provide below is accurate and true. I am pledging to participate in 100 Women Peterborough, and I am making a personal commitment to contribute \$400 each calendar year (\$100 quarterly) to local nonprofit organizations serving the Peterborough 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 Peterborough.

Completed Commitment Forms may be sent via e-mail to **info@100womenptbo.ca** Should you wish to discontinue membership at any time after your four-time commitment, please send an e-mail indicating your withdrawal.

