



Membership Commitment Form

(Please Print)

Name _____

Street Address _____

City, State & Zip _____

Telephone: Home _____ Cell _____

Email _____

I understand that I am making a commitment to 100+ Women Who Care Lake Country and will make an annual donation of \$400 - (\$100 per quarter) - directly to local worthy causes, charities, and nonprofits serving the Lake Country area. I also understand that even if I did not vote for the charity chosen, I will still fulfill my commitment. If I am unable to attend the quarterly meeting, I will mail my check directly to 100+ WWC Lake Country immediately following the announcement of the winner.

_____ Signature Date

Please scan and email your signed and dated commitment form to
100womenwhocarelakecountry@gmail.com

Along with a \$25 yearly application fee

100wwclc.com

Or, Mail to: P.O. Box 3292 Eatonton, GA 31024

The Lake Country area looks forward to and thanks you for your support!

Should you wish to discontinue membership in the 100 WWC at any time, an email indicating your withdrawal will suffice.