



Membership Application 2023-2024

Preferred Name _____ Florida Residency:
Local Address _____ Full-Time
City _____ State _____ Zip _____ Part-Time
Community/Subdivision _____
Email _____ Phone _____
I want to thank: _____ for referring me.

MEMBERSHIP CONTRIBUTION OF \$1,100 (\$1,000 Grant/\$100 Admin.) IS TAX DEDUCTIBLE

Card# _____ Expiration ___/___ Security Code _____
Name on Card _____ Signature _____

- Set me up for automatic membership renewal via my credit card
- Make me an Evergreen Member and count on me to renew every year by my anniversary date
- Check enclosed for \$1,100 made payable to Impact100 Martin, Inc.
- Charge my credit card for \$1,133, includes 3% transaction processing fee

As a voting member, I am interested in volunteering for the following committee(s):

- | | |
|--|---|
| <input type="checkbox"/> Membership | <input type="checkbox"/> Events |
| <input type="checkbox"/> Membership Engagement | <input type="checkbox"/> Grants |
| <input type="checkbox"/> Community Captain | <input type="checkbox"/> Communication |
| <input type="checkbox"/> Sponsorship | <input type="checkbox"/> One & Done Volunteer |

RECOGNITION - Impact100 Martin will proudly display your name in a list of members included in the program for our annual Grant Awards Celebration. Please contact us at info@impact100martin.org if you prefer not to be listed.

Thank you for joining Impact100 Martin to collectively create change.
Download and email completed form to info@impact100martin.org
or mail to Impact100 Martin, 11718 SE Federal Hwy, #440 Hobe Sound, FL 33455