



100+ Women Who Care Greater Venice

Charity Prequalification Form / Member

Please submit this form at least one week prior to the meeting so that we may confirm eligibility of the organization you are nominating. Once eligibility is verified the charity will be added to our list of pre-qualified charities eligible for presentation and funding consideration at a future meeting.

(please print)

NOMINATING MEMBER NAME	
NOMINATING MEMBER EMAIL	
ORGANIZATION NAME BEING NOMINATED	
CONTACT PERSON AT NOMINATED ORGANIZATION	
CONTACT PERSON'S PHONE	
CONTACT PERSON'S EMAIL	
ORGANIZATION'S STREET ADDRESS	
ORGANIZATION'S CITY, STATE, ZIP	
ORGANIZATION'S WEBSITE	
IS THIS ORGANIZATION A REGISTERED NONPROFIT (INCLUDE TAX ID NUMBER)	

_____ signature

_____ date