



## Impact Las Vegas Membership Commitment Form

### Contact Information:

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Preferred Phone #: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

### Membership Options:

**Membership** in **Impact Las Vegas** is contingent upon receipt of a \$1,000 non-refundable, tax-deductible membership donation and a signed Membership Commitment form. 100% of the Membership Donation goes toward the annual Grant. Membership Donations are due by **December 31<sup>st</sup> each year. Grants are then awarded in June the following year. Fiscal year runs July through June.**

- I want to be a **Member** (Membership Donation of \$1,000) for the next fiscal year
- I want to be a **110% Member** (Membership Donation of \$1,000 **plus** an Operating Donation of \$100 for a total of \$1,100)

### Additional Donation Options:

- I am pleased to help with an additional donation of  \$100  \$250  \$500  Other
- My Employer \_\_\_\_\_ makes **matching gifts** and I will submit the necessary forms

### Payment Options: (payment due by 12/31)

- I will be paying in **full by check**, \$1,000 by 12/31 (please make check payable to **Impact Las Vegas**)
- I will be paying by installments of \$\_\_\_\_\_ per (circle one) monthly/quarterly/two payments or \_\_\_\_\_ resulting in \$1,000 total paid by **12/31**.

### Credit Card Payments: (pay online on our website or complete information below)

- Master Card**  **Visa**  **American Express**

Name on Card \_\_\_\_\_

CC# \_\_\_\_\_

Exp: \_\_\_\_\_ V-Code: \_\_\_\_\_

Memberships paid by credit card **will include 3% processing fee**; i.e. Annual \$1,000 membership donation plus \$30 processing fee

Signature \_\_\_\_\_

Billing Add: \_\_\_\_\_ Zip \_\_\_\_\_

### Acknowledgements:

Your name will be published within the Membership and at the Annual Meeting. Membership grants permission for photographs taken of you at **Impact Las Vegas** events to be published electronically and in print for use by **Impact Las Vegas**.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN FORM & PAYMENT TO: **Impact Las Vegas** PO Box 15797, Las Vegas, NV 89114 or Fax to (702) 869-5493 or Scan and E-mail to [info@impact-lv.org](mailto:info@impact-lv.org)**

For more information regarding membership visit our web site at [www.impact-lv.org](http://www.impact-lv.org)

**Impact Las Vegas Foundation Inc.** is a Nevada nonprofit corporation exempt from federal taxes under U.S. Internal Revenue Code section 501(c)(3). All contributions may be tax deductible pursuant to the provisions of section 170(c) of the Internal Revenue Code of 1986

EIN: 45-4759782

All contributions are non-refundable.