



Power of 100 – Canadian County

MEMBERSHIP FORM

Name: _____

Address: _____

City: _____ ST: _____ Zip Code: _____

Phone: (cell) _____ (home) _____

Email: _____

How did you hear about Power of 100cc? _____

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MEMBER

I am pledging to participate in Power of 100-Canadian County and make a personal commitment to:

- Contribute \$100 quarterly (\$400 annually) for non-profit organizations serving in the Canadian County, OK community, which will be selected by the group's majority vote.
- Understand that my \$100 donation on event night will be combined with the donations of other members to become an impactful donation called the HOPE Award.
- Recognize that if I am unable to be present at an event, I will commit to payment within seven (7) days of the event date.
- Acknowledge that photographs and videos taken at events and meetings may include my image and may be used in promotional materials for Power of 100cc.
- Understand my personal contact information is strictly confidential, and it will not be shared or distributed to an outside third party without my expressed consent.

Release of Liability - By marking the checkbox you waive your legal rights to claim, sue or attempt to hold liable the parties being released in connection with any activity by the Power of 100 Foundation – Canadian County. The parties being released are: The Power of 100 Foundation – Canadian County, including all its directors, officers and volunteers. I understand and acknowledge that by signing this I agree to waive any liability claim personal or otherwise. **CIRCLE ONE: YES NO**

Signature: _____ Date: _____