

Grantmakers Forum of New York membership application

Name _____

Organization _____

Address _____

Phone _____ Fax _____

Email _____ Web site _____

Please attach a list of staff, board members and trustees or volunteers who should be included on our mailing list to receive our publications and event information. Include as many as you wish who are involved in your grantmaking.

MEMBER CATEGORY

Check one.

FULL MEMBERSHIP

- Corporate member
- Family foundation
- Other private foundation
- Public or community foundation
- Other philanthropic organization
- Family or individual donor

ASSOCIATE MEMBERSHIP

- Emeritus grantmaker Name of Organization retired from _____
- Government agency
- Professional advisor to funders

Enclosed is a check for \$ _____ payable to the **Grantmakers Forum of New York**, for a one-year membership [June 1 - May 31].

Grants awarded in New York State

\$ _____ FY ended _____ **End of Year Assets** \$ _____

Primary funding interests (*arts, youth, etc.*)

Geographic territory _____

Volunteer Interests *Check all that apply; most meet via conference call.*

- Board of Directors** - meets five times per year, twice face-to-face
- Nominating Committee** - recommends all full-term candidates for board positions
- Finance Committee** - responsible for overseeing the financial affairs of the Corporation
- Program Committee** - responsible for selecting and scheduling educational programs
- Development Committee** – responsible for setting fundraising, member recruitment and retention strategy
- Public Policy Committee** – responsible for developing common messages to government



Send this completed form with your annual dues payment made payable to:
Grantmakers Forum of New York
75 College Avenue
Rochester, New York 14607-1009

Questions? Ph. 585.232.2380 Fax 585.232.8413 www.grantmakers.org
Email gfnny@grantmakers.org