**2018 ORGANIZATIONAL MEMBERSHIP & DONATION FORM**

|  |
| --- |
| **Contact name:** |
| **Organization:** |
| **Address:** |
| **City/State/Zip** |
| **Phone:** |
| **Email:** |

***Please check your organizational membership level:***

** Justice Membership: $1,000: Includes membership, all sponsorships and trainings**

** Advocacy Membership: $500: Includes membership and 2 sponsorships of your choice [Other sponsorships opportunities and training fees are separate]**

* **Organizing Membership: $250: Includes membership and 1 sponsorship of your choice [Other sponsorships opportunities and training fees are separate]**

***Sponsorship opportunities: [please check the events your organization wants to sponsor]:***

**** 2018 Interfaith Homeless Memorial

**** 2018 Hands Across I Street

**** Homeless Speakers Bureau

**** 2018 Candidates Forum [City & County]

**** 2018 Hunger Action Day

**Additional Gift:**

**For those who wish to make an additional gift; or those who do not wish to become members, but wish to make a donation:**

** Donation or additional gift: $\_\_\_\_\_\_\_\_\_**

**Total due: $\_\_\_\_\_\_\_\_\_\_\_**

**Payment Options:**

** Check enclosed: return to SRCEH *[address below]***

** Bill me: Return form to address below or scan and return to bob@srceh.org**

** I will pay with a credit card on SRCEH’s secure website:** [**www.srceh.org/donate**](http://www.srceh.org/donate)

***Thank you for your support of SRCEH’s mission!***

*SRCEH Federal Tax ID: 46-3175193*