



LGBT Grant County Membership Application

Mission Statement

LGBT Grant County will:

- Support and engage the LGBT community thru social and educational events
- Provide emergency financial grants and scholarships
- Promote awareness of issues concerning the LGBT community and educate the Grant County area on LGBT issues.

Member of LGBT Grant County:

- Supports the work of the organization as put forth in the Mission Statement.
- Is admitted as a Member by a majority vote of the Board of Directors.
- Participates in the work of the organization, especially in the advancement of understanding and support of the LGBT community, and in the building of a strong, diverse, and safe community in Grant County NM and beyond.
- Gives of their time, talent, and financial support as able.
- Supports fundraisers.
- Attends the Annual Meeting
- Votes for Directors, and on other matters that may come before the Annual Meeting.
- Contributes suggestions and advice on all matters .

Name: _____

Email: _____ Phone: _____

Address: _____ Contact Preference: Email _____ Phone _____

Signed: _____ Date: _____

**** Please enclose a check for \$10.00 made out to *LGBT Grant County* and, if mailing, send to **LGBT Grant County, 301 College Ave. Suite 5, Silver City, NM 88061** If you wish, you may send to us by email. If due to financial circumstances you need this waived, please say so.**



[Please see reverse]

Donor Gift for the work of *LGBT Grant County*
[*LGBT Grant Count* is a 501 (c)(3); all donations are tax-deductible.]

One Time Gift

\$10____ \$25____ \$50____
\$100____ Other: \$_____

Monthly Gift

\$10____ \$25____ \$50____
\$100____ Other: \$_____

Memorial for:

Comments Concerns Suggestions

Would you be willing to serve on the Board, should an opening arise?
Yes _____ No _____

Would you be willing to be on a List of Volunteers to help out at LGBTGC functions (i.e., staff a booth, etc)

Yes _____ No _____

