AFP Greater Dayton Region Membership Scholarship Form 2020

\*Due September 4, 2020\*

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| --- | --- |
| Full Name |  |
| Email |  |
| Phone |  |
| Address |  |
| Years in Fundraising |  |
| Position |  |
| Organization |  |

1. Did you receive a scholarship in the last year? Yes / No
2. Choose membership Category: Professional / Young Professional / Associate
3. If selected, which committee would be your preference to serve on? (required)
   * 1. Membership Committee
     2. Communications and Marketing Committee
     3. Programming Committee
     4. NPD Committee
     5. IDEA Committee

The following information is not required, but your answers will help us serve you and our chapter better:

1. How would you describe your gender?
2. What is your main ethnic background
3. When is your birthday? (this question is only asked to ensure we purchase the correct membership for you)

Please submit this form to one of the following:

Lee Trusedale, VP of Membership – [lalder@thefoodbankdayton.org](mailto:lalder@thefoodbankdayton.org)

Caitlin Smith, Chapter Administrator – admin@afpdayton.org