**2023 Membership Application – Individual Philanthropists**

Thank you for your interest in joining Philanthropy Colorado. Please complete all sections of the membership application and attach the requested supporting documents.

Organization Name: Click here to enter text.

Year Established: Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code: Click here to enter text.

Phone: Click here to enter text. Website: Click here to enter text.

**About Your Grantmaking**

Are you a member of other local, regional, or national philanthropic support associations/councils? [ ]  Yes [ ]  No If yes, please list: Click here to enter text.

Principle Funding Geography

☐ Colorado Statewide ☐ Denver Metro only ☐ Individual Counties (list): Click here to enter text.

Funding Area(s) (check all that apply)

|  |  |  |
| --- | --- | --- |
| [ ]  Advocacy/Public Policy[ ]  Aging[ ]  Animals[ ]  Arts, Culture & Humanities[ ]  Capacity-Building[ ]  Community Involvement [ ]  Criminal Justice & Legal[ ]  Early Childhood Education & Services[ ]  Education: K-12  | [ ]  Education: Postsecondary/ Higher Education [ ]  Employment & Workforce Development[ ]  Equity, Diversity and Inclusion/ Justice & Rights[ ]  Families & Children [ ]  Food, Agriculture, Hunger & Nutrition[ ]  Health: Health Access & Care[ ]  Health: Behavioral & Mental Health/Substance Misuse | [ ]  Housing & Homelessness[ ]  Human Services[ ]  International/Foreign Affairs[ ]  Leadership Development [ ]  Military & Veterans[ ]  Recreation & Sports[ ]  Science & Technology[ ]  Youth Development [ ]  Other (list): Click here to enter text. |

**Financial Information**

*Individual philanthropists must give at least $25,000 annually to multiple, unrelated organizations. Giving cannot be restricted to subsidiary chapters or a single institution.*

Total giving in the previous year: $ amount

[ ]  Please provide details on contributions in the most recent fiscal year

See [Become a Member](https://www.philanthropycolorado.org/join) for Individual Membership Critieria

**Submit Membership Application**

Please return a completed application and supporting materials by email to info@philanthropycolorado.org

or mail to:
Philanthropy Colorado
5855 Wadsworth Bypass, Unit A
Arvada, CO 80003

By submitting this application, I certify our organization meets the membership criteria for Philanthropy Colorado. I acknowledge that solicitation is strictly prohibited at CAF events.

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Name [electronic signatures accepted)