**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](mailto: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)