

Community Impact Council Member Profile



Name (as preferred for publicity): _____

Is permission required from your supervisor for your participation? yes no

If yes: Supervisor's Name: _____ Phone: _____

Address (business/ mailing): _____
Street City Zip

Address (home): _____
Street City Zip

Place of Employment: _____ Title: _____

Work Phone: _____ Fax: _____ E-mail _____

Home Phone: _____ Month/Day of Birth: _____

I prefer to be contacted by: Phone Fax E-mail Mail

Spouse's Name (if applicable) _____

Have you had prior United Way experience? yes no

If so, please check appropriate box(es):

- Campaign/Fundraising
- Community Impact (formerly Community Investment)
- Board member
- Volunteer in another capacity (please list): _____

In Amarillo & Canyon In another location (please list): _____

I wish to serve on the following Community Impact Council:

___ Caring for People in Crisis _____ Ensuring Basic Needs

Please list community involvement with local non-profit agencies (i.e. volunteer, board member, etc.):

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Please return to:
Paige Lunday, Fund Distribution Specialist
United Way of Amarillo & Canyon
2207 Line Ave, Amarillo, TX 79106
(806) 376-6359 x31 fax (806) 376-9343
paige@unitedwayama.org