



Coalition of 100 Black Women Los Angeles Chapter
 P.O. Box 56337
 Los Angeles, CA 90056

NCBW.
100

National Coalition of 100 Black Women, Inc. Mission Statement:

To advocate on behalf of black women and girls to promote leadership development and gender equity in the areas of health, education, and economic empowerment.

Membership Application

Application Date _____

Full Name: _____

Check Age Range: 25-34 35-44 45-54 55-64 65+

Address: _____

City: _____ State: _____ Zip Code: _____

Preferred E-mail: _____

Telephone: Home Number: _____ Cell Number: _____
 Preferred: Home Cell

Employed Yes No Self Employed

Occupation: _____ Company Name: _____

Please list Social Media Handles/Channels:

Facebook _____	TikTok _____
Instagram _____	Twitter _____
LinkedIn _____	YouTube _____
Pinterest _____	

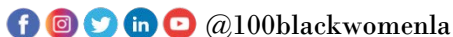
Have you had any affiliation with an NCBW Chapter Yes No

If Yes, indicate Chapter Name _____ Date(s) _____

Indicate which of the following areas you have experience, skills, or expertise:

- | | |
|---------------------------|--|
| Accounting / Finance | Marketing/Advertising/Public Relations |
| Education | Membership Recruitment & Member Development |
| Event Planning/Management | MOU/MOA |
| Grant Research | Parliamentary / Roberts Rule of Order |
| Grant Writing | Public Policy National Local Legislative Affairs |
| Health (Physical/Mental) | Social Media Management (FB, Hootsuite, IG LinkedIn, Others) |
| Legal | Website Development |

W: www.100blackwomenla.org E: 100blackwomenla@gmail.com/membership@100blackwomenla.org





Coalition of 100 Black Women Los Angeles Chapter
P.O. Box 56337
Los Angeles, CA 90056

List current or past business, professional, community, or civic affiliations and the extent of you involvement:

Organization _____	Role _____
Organization _____	Role _____
Organization _____	Role _____
Organization _____	Role _____
Organization _____	Role _____
Organization _____	Role _____
Organization _____	Role _____

Indicate your top three organization & committee interest (in order of priority) :

- | | |
|------------------------------|----------------------------|
| Alliances & Partnership | Grants |
| Bylaws | Membership |
| Budget & Finance | Nominations |
| Community Based Projects | Public Policy/Legislation |
| Education | Policies & Procedures |
| Ethics | Scholarships |
| Health & Wellness | Women Economic Empowerment |
| Fund Development/Fundraising | United Nations Outreach |



Coalition of 100 Black Women Los Angeles Chapter

P.O. Box 56337

Los Angeles, CA 90056

NCBW
100

STATEMENTS OF INTERESTS

What interest you in becoming a member of the National Coalition of 100 Black Women, Los Angeles Chapter?

What value will you add to the National Coalition of 100 Black Women, Los Angeles Chapter?

How would you define **Advocacy**?

How do you hope to benefit as a member of the National Coalition of 100 Black Women?

State definitely whether you can commit (at a minimum) of 4-6 hours per month to the National Coalition of 100 Black Women, Los Angeles Chapter. Identify exceptions: