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|  |  | **Kaleidoscope World**  A Collaborative Network of People Helping People |  |

# Membership Application Individual Group

## Member Information

|  |  |
| --- | --- |
| Name: Click here to enter text. | Phone: Click here to enter text. |
| Organization (if applic): Click here to enter text. | Phone 2 (opt): Click here to enter text. |
| Website (if applic): Click here to enter text. | Email: Click here to enter text. |
| Address: Click here to enter text. | Special notes? Click here to enter text. |
| Key Goals/Interests/Mission: Click here to enter text. | |

## Reasons for Joining

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| Networking – describe Click here to enter text.  Sharing Resources – describe Click here to enter text.  Volunteers – offering or seeking – describe Click here to enter text.  Seminars – describe Click here to enter text.  Discounts (e.g. storage, transportation etc.) – describe Click here to enter text.  Learning from and sharing info with like-minded groups & individuals  Other – describe Click here to enter text. |

## Talents/Resources I can offer to Kaleidoscope World

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| Describe anything that you wish to offer to the group: Click here to enter text. |

Kaleidoscope’s Mission is: *“We are an evolving network of individuals and humanitarian organizations working collaboratively and with minimal bureaucracy to improve the efficiency and effectiveness of our work. We are non-political and non-violent; we practice integrity, transparency and respect.”.*

As a member of Kaleidoscope World, I will support this mission.

Signature Click here to enter text. Date Click here to enter a date.

*Thank you for completing this application and for your interest in working with us.*