

Queen Bees Commitment Letter

Please Print: Name _____
Street Address _____
City, State & Zip _____
Telephone (H) _____ (W) _____ (C) _____
Email Address: _____
Bee that you were Referred By _____

I understand that I am making a commitment to **Queen Bees – Bucks County** to make an annual donation of \$400 – (\$100 at each quarterly meeting) **for a minimum of one year**. I understand that even if I did not vote for the recipient, chosen by majority vote, I will fulfill my donation commitment. I also understand that if I am not able to attend a quarterly meeting, I will provide my check to another member to deliver or mail it promptly after quarterly meeting

_____	_____
Signature	Date

I agree to have my contact information included in the Queen Bees Directory; please check: Yes _____ No _____

Completed Commitment Forms may be scanned and sent via e-mail to missykitzmiller1@gmail.com or forms may be completed and turned in at a meeting. Should you wish to discontinue membership at any time, please send an e-mail to the above address indicating your withdrawal.

*The **Queen Bees– Bucks County** thanks you for your support!*