

100 Black Men of Greater Lafayette, Inc.

Membership Application Instructions

Mission Statement

To set a new agenda for our community as a whole and Black youth in particular.

Our program are based upon our National Campaign “Four for the Future” which identifies four key areas critical to achieving the 100’s commitment to developing leaders and ensuring the future of young African American males.

Mentoring, Education, Health and Wellness, and Economic Development (Pillars of the 100)

We look for the following criteria in our members:

Positive Role Model

Good Moral Character

High Ethical Standards

Demonstrates Community Involvement or Service

Adherence to the Mission and Objectives of the Organization

Candidate must be sponsored by a member in good standing

Upon receipt of the completed application, you will be contacted by the chair of the membership committee to arrange a personal interview. **Upon notification of your acceptance, you will be required to attend a Membership Orientation Session.**

Send Completed Application to:

**100 Black Men of Greater Lafayette, Inc.
P.O. Box 61792
Lafayette, LA 70596
Attn: Membership Chairman**

(10/2017)

100 BLACK MEN OF GREATER LAFAYETTE, INC.

MEMBERSHIP APPLICATION

(PLEASE TYPE OR PRINT LEGIBLY)

FULL NAME: _____
(Last) (First) (Middle)

HOME ADDRESS: _____
(Street)

(City) (State) (Zip code)

BUSINESS ADDRESS: _____
(Street)

(City) (State) (Zip code)

TELEPHONE: _____
(Home) (Work) (Cell)

(E-mail) (Fax No.)

TYPE OF BUSINESS: _____

PRESENT EMPLOYMENT: _____

PERSONAL DATA: _____
(Date of Birth) (Religious Affiliation Optional)

(Spouse's Name)

ORGANIZATIONS/CLUB MEMBERSHIPS AND POSITIONS HELD:

SCHOOLS/YEARS ATTENDED: _____

COMMITMENT PLEDGE: I understand becoming a member requires a dedication, commitment and that this NON-PROFIT organization has a responsibility to those it Serves. Therefore I do pledge to:

RESPECT THE CONFIDENTIALITY AND PRIVACY OF THOSE I SERVE
ATTEND AT LEAST SIX (6) MONTHLY MEETINGS PER YEAR
SERVE ON AT LEAST ONE COMMITTEE
MAINTAIN OPEN COMMUNICATION WITH THE ORGANIZATION

CERTIFICATION: I certify that the information given in this application is complete and Accurate. If accepted, I agree to abide by the policies, rules, and regulations of the 100 Black Men of Greater Lafayette, Inc. I also declare that I have not been convicted of or involved in any crime related to wrongful behavior with a minor.

All applicants for membership are required to pay a \$275.00 application fee. In the event membership is denied, \$200.00 of the application fee will be returned to the applicant.

Applicant's Name (Please print) _____

Applicant's Signature _____

AUTHORIZATION TO CONSENT FOR RELEASE OF INFORMATION: I authorize the 100 Black Men of Greater Lafayette, Inc. to perform a background check into the records Of any law enforcement agency for the records of criminal convictions. I understand that Any adverse information obtained will be considered in the decision whether to accept my Application and/or limit the scope of my activities within the 100 Black Men of Greater Lafayette, Inc. I authorize any individual or entity to reveal to the 100 Black Men of Greater Lafayette, Inc., The results of this criminal background check. I release the 100 Black Men of Greater Lafayette, Inc. and any individual or entity from any and all claims, losses, liabilities, costs or expenses related to gathering and reporting this information,

Applicant's Name (Please print) _____

Applicant's Signature _____ Date _____

Sponsor's Signature _____ Date _____

**Mail Completed Application to: 100 Black Men of Greater Lafayette, Inc. - P. O. Box
61792**

Lafayette, LA 70596