Community Development Venture Capital Alliance

MEMBERSHIP APPLICATION & QUESTIONNAIRE



Area of Interest OR Job Title

PART I

Date of Application:

Name of Member:

(Entity name as you would like it to appear on the CDVCA Membership List)

Please provide information about the person you would like designated as the primary contact for your organization:

Primary Contact Person:					
5	Name		Job Title		
Department/Program: (If applicable)					
Name of Organization:					
Mailing Address:					
U	Street				
	City	State	Postal Code	Country	
	Phone		Fax		
	E-mail		Website		
Authorized Signature:					
Please list others at your org	anization whose na	mes you would like added to c	our mailing list. Use additional	sheets if needed.	
Name	E-mail address		Area of Ir	Area of Interest OR Job Title	
Name		E-mail address	Area of Ir	terest OR Job Title	

CDVCA Member Dues

Name

Membership payment is due January of each calendar year. The annual rate is U.S. \$500. Prospective members should send this completed application and questionnaire (see next page) to CDVCA, 424 West 33rd St., Ste. 320, New York, New York 10001 or via email to cdvca@cdvca.org. CDVCA will send you an invoice, for the appropriate portion of dues owed, upon receipt of the completed application.

E-mail address

Promoting Community Development with the Tools of Venture Capital

424 West 33rd St., Ste. 320; New York, NY 10001 + Phone: 212-594-6747 + Fax: 212-594-6717 + www.cdvca.org

CDVCA MEMBERSHIP APPLICATION & QUESTIONNAIRE

PART II

Access to information is critical to our work to build and promote the field of community development venture capital (CDVC). In order to facilitate our efforts to represent and advocate for the field, please provide the information requested below.

1. How would you best describe your organization?

Please check all that apply:

- o Investing entity
- o Not-for-profit organization
- o For-profit organization/company
- o Other (please describe)
- 2. What is your organization or company's mission?
- 3. (If investing entity:) What is the investment strategy of your fund?

The year your fund was established?

Funds under management?

- 4. What is your interest in CDVCA/why did you become a member?:
- 5. Please tell anything else you would like us to know about your organization, and/or about your interest in community development venture capital.