

# Executive Women of Lake Norman

*"Lady Leaders of the Lake"*

## Charity Nomination Form

Name of Charity: \_\_\_\_\_

Brief Description of Charity:

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Why do you think this charity would be a good fit for the EWLKN members to support?

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Who will be the primary and secondary representative in EWLKN that will report upcoming events to the board?

Primary Contact \_\_\_\_\_

Secondary Contact \_\_\_\_\_

It is expected that one of these representatives be able to be present at all the EWLKN morning meetings, socials and luncheons & be prepared to present information on the charity to the audience.

Do you agree? Y\_\_\_ N\_\_\_

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What specifically may we do to help?

Spring Social \_\_\_\_\_

Fall Social \_\_\_\_\_

Throughout the year \_\_\_\_\_