



21st Century Grantmaking Essentials

Holiday Inn Express – Civic Center

Charleston, WV

Apr. 22nd – 23rd

Name/Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ County: _____

Email: _____

Dietary Restrictions: YES NO (If "YES" please list below)

Member Rates:

\$100

Non-Member Rate

\$150

Total Amount Enclosed: \$ _____

*Use this form as your invoice.

MEDIA RELEASE FORM

I, _____, grant permission to **Philanthropy West Virginia**, to use my image (photographs and/or video) for use in Media publications including (check all that apply):

Videos, Email Blasts, Recruiting Brochures, Newsletters, General Publications,
 Website, Social Media

Signature: _____ Date: _____

PLEASE NOTE:

Please make your registration check payable to: "Philanthropy WV", with "21st Century Grantmaking Essentials" in the memo line. Send your check and registration form to:

Philanthropy WV
PO Box 1584
Morgantown, WV 26505

Questions? Contact Hilaria Swisher at 304-517-1450 – hilaria@philanthropywv.org