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## Women on a Mission Recognition

Do you know a woman in our community who is on a mission as a change agent, leader, or innovator in her workplace, volunteer work, neighborhood, non-profit, organization/ group, educational setting, faith/spiritual group, advocacy, etc.? In honor of the YWCA NorthEastern NY’s 35th Annual Women of Achievement Celebration & Fundraiser, we would like to recognize 35 women from our community who are on a mission.

The honorees will be recognized at the **YWCA Women of Achievement Celebration & Fundraiser** to be held Thursday, March 8, 2018 at The Glen Sanders Mansion in Scotia, NY. The deadline to submit an application is February 12, 2018 and may be emailed to funddevelopment@ywca-neny.org or mailed to*Women on a Mission, YWCA NorthEastern NY, 44 Washington Avenue, Schenectady, NY 12305*. Should you have any questions, call Jo-Anne Rafalik at the YWCA, 518-374-3394 ext. 105 or email funddevelopment@ywca-neny.org.

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| **Price** | **Includes** |
| $300 | * Two (2) dinner tickets ($180 value)
* Recognition for honoree:
	+ during Women of Achievement Celebration & Fundraiser
	+ in Women of Achievement Program Book
	+ in Women of Achievement PowerPoint
	+ on YWCA NorthEastern NY’s website
	+ in a special announcement in The Daily Gazette
	+ on YWCA NorthEastern NY’s social media
 |
| $750 | * Eight (8) dinner tickets ($720 value)
* Recognition for honoree:
	+ during Women of Achievement Celebration & Fundraiser
	+ in Women of Achievement Program Book
	+ in Women of Achievement PowerPoint
	+ on YWCA NorthEastern NY’s website
	+ in a special announcement in The Daily Gazette
	+ on YWCA NorthEastern NY’s social media
 |

This is a non-competitive award, meant to honor women in our community who make a difference. Only 35 honorees will be given this distinction.

## Women on a Mission Information Form

**Honoree Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Person Submitting Form:**

Business/Organization/Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recognition Level: ☐ $300 ☐ $750

Payment Information: ☐ Check *(made payable to the YWCA NENY)*

 ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date: \_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In a few words, describe how the honoree has been a change agent, leader, or innovator in one or more of the following areas:

• Workplace • Volunteer work

• Neighborhood • Non-profit

• Group/organization • Educational setting

• Faith/spiritual group • Advocacy

• Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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