

Membership Application

ibuyneo.com



GUIDELINES: BENEFICIARY

- The Non-Profit Organization must be located in Northeast Ohio.
- The Non-Profit Organization must have the ability to demonstrate that the proceeds of these donations will only benefit the Northeast Ohio region.
- The Non-Profit Organization will demonstrate a willingness and plan to market the I Buy NEO Community Card to their donor base in order to maximize the pool of local program funds and consequently, donations for Non-Profit Organization beneficiary.

GUIDELINES: DISTRIBUTOR

- The Distributor will receive a sales toolkit to assist with the sales effort.
- The Distributor will provide a detailed marketing plan to achieve 12 month goal, and review the plan on a quarterly basis.
- The distributor agreement will be extended after 12 months based on goal attainment.

Please answer the questions pertaining to your interest in the I Buy NEO Community Card program.

1. Non-Profit Organization full legal name:

2. Non-Profit Organization doing business as:

3. Tax Exempt ID # (EIN):

4. Name of Executive Director:

5. Name of Applicant & Contact Information:

6. Non-Profit Organization website:

7. Brief summary of the Non-Profit Organization's history and mission.

8. Description of population & geographic region (community) served.

COSE

Join your cause.

9. Please select a category that best represents the Non-Profit Organization.

- | | |
|---------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Economic Transformation | <input type="checkbox"/> Health |
| <input type="checkbox"/> Neighborhood and Housing Development | <input type="checkbox"/> Environment |
| <input type="checkbox"/> Education | <input type="checkbox"/> Community Development |
| <input type="checkbox"/> Arts & Culture | <input type="checkbox"/> Human Services |

10. If the Non-Profit Organization were to be featured during one month in a calendar year, what would be the most advantageous month?

11. Are you a member of COSE?

12. Please describe the size and characteristics of your donor base.

13. What are the major ways that you communicate with your donor base?

- | | |
|--------------------------------------|----------------------------------------|
| <input type="checkbox"/> Email | <input type="checkbox"/> Telemarketing |
| <input type="checkbox"/> Direct Mail | <input type="checkbox"/> Other _____ |

14. What affiliations or groups do you currently partner with?

Signature: _____

I Buy NEO Signature: _____

Print Name: _____

Print Name: _____

