



## DVG Membership Application

Thank you for your interest in joining DVG. Please contact us at 215-790-9700 or [info@dvg.org](mailto:info@dvg.org) if you have questions regarding this application. If any particular item below does not apply to your organization, please leave it blank and/or contact us.

1. **Contact Information** (If desired, please attach business card in lieu of completing this section)

Organization Name \_\_\_\_\_  
 Name/Title of Contact Person \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Email \_\_\_\_\_ Website (if applicable) \_\_\_\_\_  
 County location \_\_\_\_\_

2. **Type of Organization** (please check one)

**Private Foundation**  
 Such as Family/Trustee-Managed, Independent, Charitable Trust, etc.  
 Please specify: \_\_\_\_\_

**Corporate Foundation**

**Corporate Giving Program**

**Grantmaking Public Charity\***  
 Includes Community Foundations, "Health Conversion" Foundations, and other entities that both fundraise and make grants.  
 Please specify: \_\_\_\_\_

*\* In the case of grantmaking public charities, a minimum of \$50,000 from the operating budget must be allocated for grants to multiple organizations.*

**Individual Donor**  
 To qualify, charitable contributions must be made to multiple grantees and total a minimum of \$25,000 per year.

**Other**  
 This category covers other entities that make charitable grants, including: Donor Advised Funds, Federated Funds, Bank Trust Departments, Quasi-Public Grantmaking Entities, etc.)  
 Please specify: \_\_\_\_\_

**Membership Dues:**

Annual Membership Dues in DVG are based on your organization's total prior year's grants. The annual membership period is concurrent with the calendar year. Renewals are billed in December.

Annual Grants Awarded	DVG Dues
Less than \$100,000	<b>\$500</b>
\$100, 000 to \$250,000	<b>\$750</b>
Associate Member *	<b>\$825</b>
\$250,000 to \$500,000	<b>\$1,025</b>
\$500,000 to \$1 million	<b>\$2,000</b>
\$1 million to \$2 million	<b>\$3,750</b>
\$2 million to \$5 million	<b>\$6,000</b>
Federated Funds**	<b>\$9,000</b>
\$5 million to \$10 million	<b>\$9,500</b>
\$10 million to \$20 million	<b>\$17,000</b>
Over \$20 million	<b>\$27,500</b>

\* Associate Members are non-corporate organizations located more than 50 miles from Philadelphia.

\*\* Dues for Federated Funds are capped at \$8,500.

3. **Total Assets** (if applicable) \$ \_\_\_\_\_

4. **Previous Year's Total Charitable Giving** \$ \_\_\_\_\_

5. **Membership Dues Enclosed** (please see chart above) \$ \_\_\_\_\_

Please make checks payable to "Delaware Valley Grantmakers"  
 DVG's tax ID # is 23-2518417

6. **If available/applicable, please attach:**

- ✓ a copy of your IRS determination letter
- ✓ your most recent annual report

7. **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Thank you for your support!**  
**Please see reverse for our Application Procedure and**  
**a few additional questions aimed at helping us to best serve your needs.**

---

## APPLICATION PROCEDURE

---

Your complete Membership Application should include your:

- ✓ Completed and signed *Membership Application Form*
- ✓ Dues check made payable to "Delaware Valley Grantmakers"
- ✓ IRS determination letter
- ✓ Most recent annual report (if available)

Please submit these materials to:

**Delaware Valley Grantmakers**  
**230 South Broad Street, Suite 4C**  
**Philadelphia, PA 19102**

You will hear from a member of DVG's staff promptly upon receipt of your application.

---

## OPTIONAL INFORMATION TO HELP US SERVE YOU BETTER

---

*Please take a few moments to answer these questions that will help us better address your interests and serve your needs.*

### 1. Your Organization's Giving Priorities:

Please indicate your organization's areas of funding interest. Feel free to attach a brochure, application guidelines, or a description from your Web site that describes your giving priorities and goals.

- |   |  |
|---|--|
| <input type="checkbox"/> Arts & Culture                 | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Community/Economic Development | _____  |
| <input type="checkbox"/> Education                      | _____  |
| <input type="checkbox"/> Health                         |  |
| <input type="checkbox"/> Human/Social Services          |  |

### 2. Additional Staff/Trustees:

Your membership in DVG covers participation for all staff and trustees of your organization. Please provide us with a list of additional people from your organization who might participate in the DVG membership. (***Please attach a separate sheet if necessary.***)

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

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### 3. Affinity and Peer Groups

DVG convenes several affinity and peer groups that help our members network and share information with colleagues of similar type or with like funding interests. Please indicate if you would like to be added to our list for any of these groups:

- |   |   |
|---|---|
| <input type="checkbox"/> Arts Funders                           | <input type="checkbox"/> Corporate Donors Forum                         |
| <input type="checkbox"/> Community Development Funders          | <input type="checkbox"/> Family Foundation Forum                        |
| <input type="checkbox"/> Public Education Funders               | <input type="checkbox"/> Health Conversion Foundations                  |
| <input type="checkbox"/> Emerging Practitioners in Philanthropy | <input type="checkbox"/> Other groups that would be of interest to you: |
- \_\_\_\_\_

### QUESTIONS?

If you have any questions about this application or about membership in DVG, please contact us by phone at 215-790-9700 or by email to [info@dvj.org](mailto:info@dvj.org).

[www.dvj.org](http://www.dvj.org)