



PROJECT SUMMARY – POP-UP IMPACT TEAM PROGRAM

RETURN WITHIN 30 DAYS OF THE EVENT TO THE OUTREACH AND ENGAGEMENT DEPARTMENT.

An individual beneficial member (age 16+), that is not in an active impact team, may gather their friends and family together to create an event 2x.

Contact Name: _____

Primary Phone No: _____ Email: _____

Event Name: _____ Date of Event: _____

Today's Date: _____

- Project was a Service Activity
- Project was a Fundraiser
- Project was an Educational Event
- Other: _____

1) Event Sign In / Media Release:

Please have all volunteers sign in on the separate 'Volunteer Sign In Sheet' sheet on page 2.

How many 1891 members volunteered at the event? _____ Estimate of how many people attended? _____

2) Share Your Success: Send Photos and Video!

- Printed photos of the event mailed with form, or Digital items emailed to outreach@1891FinancialLife.com

Tell us about highlights, special guests, reactions, etc.

3) Receipts

Please submit receipts to the Home Office.

Was all the project seed money spent? Yes No

If your project was a fundraiser: Total Funds Raised: _____

Items Collected and Quantity: _____

CONTACT SIGNATURE: _____

Please submit this form to: 1891 Financial Life Outreach and Engagement
200 N. Martingale Rd., Ste. 405, Schaumburg, IL 60173
FAX: (847) 342-4556 • Email: outreach@1891FinancialLife.com

Volunteer Sign In Sheet

Thank you for volunteering! By providing your details, you agree we may contact you for event updates, future opportunities, and important information.

PLEASE PRINT. If you need more space, use a separate sheet of paper.

Name: _____

Email address: _____ Phone Number: _____

Please check one: Beneficial Member Social Member Not a member

Name: _____

Email address: _____ Phone Number: _____

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