

**EAU CLAIRE COMMUNITY FOUNDATION
PUBLIC CHARITY ADVISORS SIGN-UP**

The undersigned (hereinafter called "Participant"), an advisor in the field of _____ (*law, tax, accounting, finance*) agrees to participate in the Eau Claire Community Foundation's PCA (Public Charity Advisors) program under the following conditions:

1. That Participant will not be asked to provide services outside his/her stated field or outside the guidelines of the PCA program.

2. That professional advice to qualified local charities will be subject to the charities granting to Participant an indemnification and hold harmless for such free professional advice except in the case of the gross negligence on the part of the advisor. In addition, all charities will be pre-screened by the Eau Claire Community Foundation to assure that the request is within the parameters of the program (i.e. pertinent to the field of the advisor and capable of being handled within the field of interest and time frame established by advisor).

Professional Advisor Information:

Name: _____

Occupation: _____

Employer: _____

Address for Correspondence: _____

E-mail Address: _____

Telephone Number: _____

Maximum Number of Hours Available: _____ per _____

Dated: _____

Participant