

Taxpayer ID #81-4000190

## **Membership Form**

We welcome new members. Please print this form and mail it, along with your check or credit card information, to: WRWF, P.O. Box 3686, Ketchum, ID 83340. □ New Member
□ Sponsor a Member □ Renewing Member Please read the information at the end \*\* for details on how funds will be distributed. Name: \_\_\_\_\_ Mailing Address: City, State, Zip: \_\_\_\_ ☐ Enclosed is my check for \$1,100 payable to "Wood River Women's Foundation." ☐ Enclosed is an additional donation to the WRWF Administrative Fund of \$\_\_\_\_\_ ☐ I would like to sponsor a member. Enclosed is an additional \$1,100 Member name: Email: □ Charge my Visa or Mastercard for \$\_\_\_\_\_ (Member dues are \$1,100) Acct. No.:\_\_\_\_ Exp. Date:\_\_\_\_\_ Code: \_\_\_\_\_ Signature: Billing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

The additional \$100 is to help defray administrative & event costs so that your entire donation will go to charitable organizations.

Allocate my donation as follows:
□ <b>Option A:</b> Please give my entire \$1,000 contribution to the WRWF Pooled Fund for Wood River Valley grants.
□ <b>Option B:</b> Please allocate \$500 to the Wood River Women's Foundation Pooled Fund and \$500 to the following:
Organization:
Address:
Telephone:
□ <b>Option C:</b> Please allocate \$500 to the Wood River Women's Foundation Pooled Fund and \$250 to each of the following:
Organization #1:
Address:
Telephone:
Organization #2:
Address:
Telephone:
*Donations must be at least \$250 each, and may be made to any tax-exempt charity or government organization in the United States.
☐ I know someone who is interested. Please email them information:
Name:
Email/Phone:
**All funds will remain in the Idaho Community Foundation for at least six months to avoid administrative costs and allow every penny of your donation to go to charitable organizations  **Your receipt will show densitions to the Wood Biver Wemen's Foundation. Be assured, however, that we

Checks received from **January to March** will be distributed to organizations the following October. Checks received from **April to June** will be distributed to organizations the following January. Checks received from **July to September** will be distributed to organizations the following April. Checks received from **October to December** will be distributed to organizations the following July.

<sup>\*\*</sup>Your receipt will show donations to the Wood River Women's Foundation. Be assured, however, that we do keep track of the organizations listed to receive your individual donations. Individual donations will be distributed after they have remained in the ICF for 6 months and at the beginning of the following quarter. It is your responsibility to notify organizations of your future donation should you wish to receive recognition of your contribution in advance of the distribution.