

2017 MEMBERSHIP PLEDGE

**Yes, I want to make a difference in the lives of women and girls in Central Kentucky**

*Name*

*Address*

*City State Zip*

*Email Phone*

**TYPE OF MEMBERSHIP PLEDGE**

🔾 Individual $1,000 🔾 Jr Membership - shared by 2 people under age 30 at $500 each {1 vote}

🔾 Lifetime Membership - $25,000 payable over 5 years

**PAYMENT OPTIONS**

🔾 1 annual payment of $1,000 🔾 4 equal payments of $250 🔾 12 equal payments of $85

*[Payments must be complete by October 30th of each year. Gifts are 100% tax deductible.]*

🔾 I am not able to join this year, but want to help! Please accept my tax-deductible contribution in the amount of $\_\_\_\_\_\_\_.

*Make checks payable to:*

Central Kentucky Community Foundation ⏐306 West Dixie Avenue ⏐ Elizabethtown, KY 42701

**MEMBERSHIP INVOLVEMENT – How I want to help!**

🔾 Investor Development 🔾 Grant Applicant Recruitment 🔾 Grant Review 🔾 Banquet

Membership Agreement Signature Date