



MEMBERSHIP PLEDGE 2019

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

MEMBERSHIP INVOLVEMENT- How I want to help.

- Investor Development
- Grant Application Recruitment
- Grant Review
- Banquet/Events

Membership Agreement Signature _____

Date _____

I am unable to join this year but want to help. Please accept my tax-deductible contribution in the amount of \$ _____

PAYMENT OPTIONS

- 1 annual payment of \$1,000 payable by check or credit card
- 4 installment payments of \$250* (Jan., Apr., July, Oct.)
- 12 installment payments of \$85* a month beginning Nov. 15

** For installment payments please provide credit card information.*

Make checks payable to:

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

Payment must be complete by Oct. 30 of each year. Gifts are 100% tax deductible.

DEBIT/CREDIT CARD AUTHORIZATION:

I hereby authorize Central Kentucky Community Foundation to charge my debit/credit card provided herein according to the payment option selected above.

Card Type: Visa Mastercard Discover American Express

Card Number: _____

Expiration Date: _____

Card Identification Number (last 3 digits on back of card): _____

Cardholder Name: _____

Address (if different from left column):

Signature: _____

Date: _____