



2024 DYAD MEMBERSHIP REGISTRATION FORM

Membership is granted upon receipt of your donation AND completed membership form.

I am renewing my membership.

I am a new member.

How did you hear about us? _____

PERSONAL INFORMATION – To be completed each year

Preferred Name (for directory): _____
First Last

Home Phone: _____ - _____ - _____ Mobile Phone: _____ - _____ - _____

Email: _____

Address: _____

City, State, Zip: _____

Dyad Partner Name: _____ *Submit registration forms at same time.*

Check your selections below:

- I would like to be contacted to get involved.
- I would like to be contacted about company matching gifts from my / my partner’s employer.
- My name, phone number, and email address may be published in the members-only directory.
- I understand that photos taken of me at Impact 100 Redwood Circle events may be published electronically or in printed materials.

DONATION INFORMATION

Member Donation for Impact 100 Redwood Circle Fund	\$ 500
Fee for operations expenses	\$ 125
SUBTOTAL	\$ 625

Add: Optional additional donation for operations expenses _____

Add: Optional donation for Impact 100 Redwood Circle Core Values Membership _____

Add: \$25 administration fee if paying by credit card _____

TOTAL TAX-DEDUCTIBLE DONATION _____

Contact invest@sonomacf.org to make additional donations for grants.

PAYMENT INFORMATION

CHECK: Make checks payable to Community Foundation Sonoma County, For: Impact 100 Redwood Circle

DONOR ADVISED FUND TRANSFER:

To: Community Foundation Sonoma County Impact 100 Redwood Circle

From: Name of organization and fund sending transfer _____

CREDIT CARD: VISA MasterCard

Please mark box to authorize a \$25 required administration fee for credit card payment.

Credit Card number: _____ Exp: _____ / _____ Security Code: _____

Signature: _____ Date: _____

Mail form to Community Foundation Sonoma County, 120 Stony Point Road, Suite 220, Santa Rosa, CA 95401

Contact us at impact100membership@gmail.com