1 M P A C T 2025 DYAD MEMBERSHIP REGISTRATION FORM

Membership is granted upon receipt of your	donation AND completed membership form.
☐ I am renewing my membership.	donation Arts completed membership form.
REDWOOD CIRCLE I am a new member.	
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	
My name, phone number, and email address may be publis	<i>,</i> , , , , , , , , , , , , , , , , , ,
I understand that photos taken of me at Impact 100 Redwo electronically or in printed materials.	ood Circle events may be published
electronically of in printed materials.	
DONATION INFORMA	ATION
Member Donation for Impact 100 Redwood Circle Fund	\$ 500
Fee for operations expenses SUBTOTAL	\$ 125 \$ 625
Add: Optional additional donation for operations expenses	\$ 625
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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 <u>invest@sonomacf.org</u> to make addi	itional donations for grants.
PAYMENT INFORMAT	TION
CHECK: Make checks payable to Community Foundation Sonom	a County, For: Impact 100 Redwood Circle
DONOR ADVISED FUND TRANSFER:	
To: Community Foundation Sonoma County Impact 100 Red	lwood Circle
From: Name of organization and fund sending transfer	·
CREDIT CARD: VISA MasterCard Please mark box to authorize a \$25 required administra	tion fee for credit card payment.
Credit Card number:	Exp:/ Security Code:
Signature:	