1 M P A C T 2025 INDIVIDUAL MEMBERSHIP REGISTRATION FORM

Manufacultin is greated upon possint of up		AND commis	
Membership is granted upon receipt of yo	ur donaπon	AND comple	tea membersnip form.
REDWOOD CIRCLE I am renewing my membership. I am a new member.			
WOMEN TRANSFORMING IN THE WITHOUT THE WOMEN TRANSFORMING SONOMA COUNTY through COLLECTIVE PHILANTHROPY HOW did you hear about us?			
PERSONAL INFORMATION – To b	e completed	d each year	
Preferred Name (for directory):			
First	Lo	ast	
Home Phone: Mob	oile Phone: _		
Email:			
Address:			
City, State, Zip:			
Check your selections below:			
☐ I would like to be contacted to get involved.			
☐ I would like to be contacted about company matching g	gifts from my	/ my partner	-'s employer.
My name, phone number, and email address may be pu			
I understand that photos taken of me at Impact 100 Rec	dwood Circle	e events may	be published
electronically or in printed materials.			
DONATION INFOR	MATION		
Member Donation for Impact 100 Redwood Circle Fund			\$ 1,000
Fee for operations expenses			\$ 125
SUBTOTAL			\$ 1,125
Add: Optional additional donation for operations expens			
Add: Optional donation for Impact 100 Redwood Circle C	Core Values N	Membership	
Add: \$25 administration fee if paying by credit card			
TOTAL TAX-DEDUCTIBLE DONATION			
Contact <u>invest@sonomacf.org</u> to make a	ıdditional do	nations for g	ırants.
PAYMENT INFORM	MATION		
CHECK: Make checks payable to Community Foundation Son	oma County,	, For: Impact	100 Redwood Circle
DONOR ADVISED FUND TRANSFER:			
To: Community Foundation Sonoma County Impact 100 I	Redwood Cir	cle	
From: Name of organization and fund sending transfer _			
CREDIT CARD: VISA MasterCard			
Please mark box to authorize a \$25 required adminis	stration fee f	or credit card	l 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