



**WOOD RIVER  
WOMEN'S  
FOUNDATION**

Taxpayer ID #82-0425063

**Membership Form & Endowment Donation**

We welcome new members. Please print this form and mail it, along with your check or credit card information, to WRWF, PO Box 3686, Ketchum, ID 83340.

- New Member**
                 
  **Membership Renewal**
                 
  **Sponsor A Member**

**Please read the information at the end \*\* for details on how funds will be distributed.**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Enclosed is my check for \$1,100 payable to the  
"Idaho Community Foundation – Wood River Women's Foundation"**

**Enclosed is an additional donation of \$\_\_\_\_\_ to WRWF**

**I would like to sponsor a member. Enclosed is an additional \$1,100.00**

**Member name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Charge my Visa or MasterCard for \$\_\_\_\_\_**

**Name** \_\_\_\_\_

**Acct. No.** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**City**\_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

The additional \$100 is to help defray administrative & event costs so that your entire donation will go to charitable organizations.

**Allocate my donation as follows:**

**Option A:** Please give my entire \$1,000 contribution to the WRWF Pooled Fund for Wood River Valley grants.

**Option B:** Please allocate \$500 to the Wood River Women’s Foundation Pooled Fund and \$500 to the following:

Organization \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**Option C:** Please allocate \$500 to the Wood River Women’s Foundation Pooled Fund and \$250 to each of the following:

Organization #1 \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Organization #2 \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

\*Donations must be at least \$250 each, and may be made to any tax-exempt charity or government organization in the United States.

I know someone else who is interested. Please email the information to:

Name: \_\_\_\_\_

Email/Phone: \_\_\_\_\_

- **\*\*All Funds will remain in the Idaho Community Foundation for at least six months** to avoid administrative costs and allow every penny of your donation to go to charitable organizations.
- Your receipt will show donations to the Wood River Women’s Foundation. Be assured, however, that we do keep track of the organizations listed to receive your individual donations. Individual donations will be distributed after they have remained in the ICF for 6 months and at the beginning of the following quarter. You will receive a confirming letter when your individual grants are distributed. It is your responsibility to notify the organizations of your future donation should you wish them to recognize your contribution in advance of the distribution.

Checks received from **January to March** will be distributed to individual organizations the following October.

Checks received from **April to June** will be distributed to individual organizations the following January.

Checks received from **July to September** will be distributed to individual organizations the following April.

Checks received from **October to December** will be distributed to individual organizations the following July.

### **ENDOWMENT DONATION - Taxpayer ID #81-4000190**

Yes! I want to show my support to the Wood River Women’s Foundation Endowment Fund with a tax-deductible gift to help ensure the WRWF will have a sustainable long-term impact in the Wood River Valley.

**Please find my Endowment gift paid by check (preferred) or charge my credit card with an added 3% convenience fee.**

\$500     \$1,000     \$2,500     \$5,000     \$10,000     \$25,000

Other \$ \_\_\_\_\_

The WRWF board has established a permanently restricted endowment that will support the Foundation's operations in perpetuity. Therefore, I acknowledge that all contributions to this endowment will be similarly restricted.