



**WOOD RIVER
WOMEN'S
FOUNDATION**

“Sprouting Fund” Membership Form Taxpayer ID #82-0425063

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

Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

**Enclosed is my check for \$550 payable to the
“Idaho Community Foundation – Wood River Women’s Foundation”**

Enclosed is an additional donation of \$_____ to WRWF

Charge my Visa or MasterCard for \$ _____

Name _____

Acct. No. _____ Exp. Date _____ Code _____

Signature _____

Billing Address: _____

City: _____ State: _____ Zip Code _____

Please tell us how you found out about us _____

I know someone else who is interested.

Name: _____

Email/Phone: _____