



An Initiative of High Country United Way

We invite you to join our efforts!
Membership Opportunities:

Circle of Friends

My enclosed check is for \$_____ OR

For my convenience, please bill my credit card for the following amount monthly:

- \$5 (\$60/year)
 \$10 (\$120/year)
 \$20(\$240/year)
 \$30 (\$360/year)
 \$40 (\$480/year)
 \$50 (\$600/year)
 \$75 (\$900/year)

Other _____

My membership in the Circle of Friends will keep me informed about High Country Women's Fund. I will have the opportunity to have a voice by participating in activities and serving on committees of my choice.

Director's Circle

I would like to become a voting member of the HCWF by joining the Director's Circle for a monthly pledge of \$100/month, (\$1200/year).

- My enclosed check is for \$_____ OR
 Please draft my credit card monthly OR

Please bill me:

- quarterly
 semi-annually
 annually

My commitment to the Director's Circle gives me all the benefits of membership PLUS I will have a vote in how money is distributed in the community.

No good or services were given in exchange for this contribution.

AR



I want to be part of the change. . .
women helping women . . .

Name: _____

I wish to remain anonymous

Preferred mailing address:

City: _____ State: _____ Zip: _____

Email: _____

(optional to receive newsletter)

Phone: _____ (optional)

We take great measures to keep your information safe and private!

Payment Information:

Credit Card Number: _____

Exp Date: _____ 3 Digit Security Code: _____

Signature: _____

Please make checks payable to: High Country Women's Fund

Mail completed pledge card to:

High Country Women's Fund

PO Box 144, Boone, NC 28607 828-264-4007

Thank You!

All gifts to High Country Women's Fund are tax deductible thanks to our partnership with High Country United Way

