

## MEMBERSHIP AND DONATION FORM

Please provide your name, address, email, and phone number(s). This information will appear in our membership directory. You may also donate and/or join the club online at <a href="http://womansclub.wustl.edu">http://womansclub.wustl.edu</a> and use a credit card. Membership contributions and donations are fully tax deductible. The Woman's Club encourages matching corporate gifts. Please contact your company's human resource office.

NAME _								
ADDRESS _								
CITY, STATE,	ZIP							
EMAIL: _								
PREFERRED P	PHONE:							_
SECONDARY	PHONE:							-
PRIMARY WL	J CONNECTIO	N (Select only	one):					
□Admin	□Alum	□Faculty	□Friend	□Parent	□Spou	ıse □Staff	□Stude	nt
MEMBER WO	ORK AFFILIATI	ION (if any):						
SPOUSE/PAR	TNER NAME:							
SPOUSE/PAR	TNER WORK	AFFILIATION (i	if any):					
MEMBERSHIP CONTRIBUTIONS:				DONATIONS:				
☐ \$50 Regular Level					\$	Risa Zwerli	ng Wrighton	Endowed Scholarships
☐ \$100 Sustaining Level				$\square\ \$$ Elizabeth Gray Danforth Butterfly Garden Endowment				
☐ \$250 Sponsoring Level				☐ \$Assembly Series Lecture Endowment				
☐ \$500 Benefactor Level				☐ \$Learning Endowment Fund				
☐ \$1,000 Giving Level				Don	ation bei	ng made:		
☐ No fee, one year guest membership				☐ In Honor of ☐ In Memory of				
☐ No fee, 50	)+ year memb	pership						
☐ No fee, Honorary membership				Please provide a name and address so we may notify the family or friends of your generous gift:				
		ted form with npus Box 7460						University, mail to the club at rovide:
Card Number:				Zipcode for card				
Expiration D	oate:/	′ CVV:	: Si	ignature				