Contribution Form

Yes, I will support The Family of Woman Film Festival.

Email Address _____

☐ I would like to subscribe to the Women Deliver mailing list.

Telephone Contact _____

☐ **Platinum Sponsor** – Enclosed is a check or payment information for $10,000
☐ **Gold Sponsor** – Enclosed is a check or payment information for $5,000
☐ **Silver Sponsor** – Enclosed is a check or payment information for $2,500
☐ **Sponsor** – Enclosed is a check or payment information for $1,000
☐ **Supporter** – Enclosed is a check or payment information for $500
☐ **Friend** – Enclosed is a check or payment information for $250

Name (s) of Sponsors or Supporter(s): _____

☐ I cannot attend, but I'd like to support the Festival. Enclosed is a check or payment information for a _____ donation to the 2018 Family of Woman Film Festival.
☐ I cannot attend, but I'd like to support the Festival. Please charge my credit card in the amount of: _____ for a donation.

PAYMENT OPTIONS:

By Check (Preferred Method):

Please make checks payable to *Women Deliver.* 501c3 Tax-Exempt Organization: ID 24-446-2256

By Card:

Please print clearly

Credit Card Type: ☐ MasterCard ☐ Visa ☐ American Express ☐ Discover Card

Name _____

Card Number | Exp Month | Exp Year | CVV2

(3 digit number on back of Visa/MC, 4 digits on front of AMEX)

Billing Address _____

Signature_____

☐ Please call me for a credit card payment or other payment arrangements.

Name_____ Phone_____

By Card Via Paypal:

You may pay by credit card via Paypal at www.womendeliver.org

WOMEN DELIVER

Please mail this form to Women Deliver at P.O. Box 1676 | Sun Valley, ID | 83353
Thank you for your support.

Contact
Nikki Engkraf | Festival Coordinator:
Phone: 208.720.6756 | Email: nikki@familyofwomanfilmfestival.org
PO Box 1676, Sun Valley, ID 83353

The FAMILY of WOMAN FILM FESTIVAL *Women on the Margins* 11