

# ESTHER Individual Membership Form



Name \_\_\_\_\_

Additional Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Congregation / Affiliation \_\_\_\_\_

I would prefer to keep my donation anonymous.

## ESTHER Individual Membership Levels

• *Member*: \$25-119 • *Sustaining Member*: \$120-999 • *Underwriter*: \$1,000 or more

*Membership is easy with Electronic Funds Transfer. It saves time and resources!*

**Yes!** I would like to become a Sustaining Member or Underwriter by enrolling in the monthly giving program.

To start or renew your membership at the Sustaining Member or Underwriter level using an automatic payment option, fill out this and return it form with your voided check to:

**ESTHER, PO Box 784, Neenah, WI 54957.**

Ongoing monthly payments through Electronic Funds Transfer:

- Checking Account: attach a VOIDED CHECK
- Savings Account: attach a SAVINGS DEPOSIT SLIP

Monthly amount \$ \_\_\_\_\_ (\$10 minimum)

Please select date of withdrawal:  1st of month OR  16th of month

I authorize my financial institution to transfer the amount indicated from the stated account to ESTHER. This authorization shall remain in effect until I notify my bank (or ESTHER) that I wish to discontinue the regularly scheduled transfer of funds. A record of each charge will be indicated on my regular bank statement.

Signature (for EFT) \_\_\_\_\_ Date \_\_\_\_\_

*Or, become a member by sending us your check.*

**Yes!** I want to be a member of ESTHER and I am enclosing a check with my annual donation.

To begin or renew your membership using the single-payment option, fill out this form and return it with your check to: **ESTHER, PO Box 784, Neenah, WI 54957.**

I have enclosed a check for:  \$25  \$120  \$250  \$500  Other

REMEMBER: Your Contribution to ESTHER is Tax Deductible

For questions, call (920) 843-8083 or contact us at [office@esther-foxvalley.org](mailto:office@esther-foxvalley.org)

**Thank you for supporting the work of ESTHER!**