



Membership Form

Thank you for your interest in joining the **Power in the Purse** Women's Giving Circle.

To join, please complete this membership form and mail with a \$50 check made payable to the Bryan Area Foundation for the PIP Endowment Fund. Mail to: PO Box 651, Bryan, OH 43506

Contact Information

Name _____

Mailing Address _____

Email Address _____

Phone Number _____

By signing below, I pledge to contribute \$250 per year to join **Power in the Purse**. This includes a \$50 contribution for the **Power in the Purse Endowment Fund** through the Bryan Area Foundation plus four (4) quarterly contributions of \$50 each to support a nonprofit organization that is chosen by the membership. If you desire, the entire \$250 can be paid at the time of joining or renewing membership.

Please make checks payable to the Bryan Area Foundation.

I agree to honor my commitment even if I am not fond of the charity chosen or if I am unable to attend a quarterly meeting.

Printed Name _____

Signature _____ Date _____

YES

I hereby authorize the Bryan Area Foundation to make use of all images and information photographed or shared in the following media outlets (all PIP/Bryan Area Foundation social media sites, including but not limited to Facebook, Instagram, YouTube, Twitter, Bryan Area Foundation websites, email and newsletters) for the purpose of promotion and/or marketing of PIP/Bryan Area Foundation. I understand that there are no time limits or other limiting factors to the use of the images, products or information.



Power in the Purse
Affiliated with the Bryan Area Foundation