WOMEN OF TOLEDO SUPPORTER

Questions? Contact Nina Corder at 419.377.5457 or nina@womenoftoledo.org
Donations can be made via our website at www.womenoftoledo.org. View the listing of
our current Partners & Supporters in the 'Get Involved" section.

Full Name: _______________________________  Email: _____________________________________________________
Phone: _____________________________________  Website: ___________________________________________________
Address: ____________________________________  Company** ______________________________________________
City/State/Zip: __________________________________  **Company/Business Members: Please email your company logo,
in vector or pdf format to info@womenoftoledo.org.

Partners and Supporters  Contribution  My Donation
Circle of Friends $1 to $249  _________
Circle of Community Partners $250 to $499  _________
Circle of Ambassadors $500 to $749  _________
Circle of Leaders $750 to $999  _________
Circle of Partners $1000 to $2499  _________
Circle of Promoters $2500 to $4999  _________
Circle of Allies $5000 to $9999  _________
Circle of Champions > $10,000  _________

Additional contribution for
No Women Left Behind/HeforShe Scholarship  _________

Women-Owned Business
We invite you to also be a HerHub Member.
Learn about the directory benefit and ROI
at www.419herhub.org/joinus
HerHub Membership $99 annually  _________

Total Payment  _________

What Will Your Donation Support?
I choose to support:  minimum donation
___ A Coaching/Technical Assistance session $150
___ Small Groups (Talking Circle) $250
___ A program session $500
___ Series Session or Special Program $1,000
___ Organization general support $ Any

Method of Payment
___ Check made payable to Women of Toledo
___ I will donate via WomenofToledo.org/getinvolved
___ One Time Credit Card Payment
___ Annual Credit Card Payment (Recurring)
___ Monthly Recurring Credit Card Payment

CC # ______________________________  Exp _____/______    CVV (3-digit code) _____________
Billing address _____________________________________________________________
I am authorizing Inclusive Women of Toledo Inc. to
charge the card in the amount of $ ________________
Signature _______________________________________

Sign me up!
I would like to give some time to the organization.
Areas of Interest  How I would like to help:
___ Mentorship
___ Advocacy
___ Outreach
___ Leadership
___ Volunteer
___ Youth
___ Fundraising

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