

To establish this service, please complete this form and send it to the Zonta Foundation for Women, ATTN: Contributions, 1200 Harger Road, Suite 330, Oak Brook, IL 60523. Please allow two to three weeks for charges to begin.

1. Donor

Donor Name _____

Street Address _____ City _____

State/Province _____ Postal Code _____ Country _____

Email Address _____

Zonta Club of _____ District _____ Area _____ Club _____

We are pleased to offer you the option of making your gift automatically. Due to the administrative costs associated with such transactions, we ask that you consider a minimum monthly or quarterly contribution of US\$10.00. Thank you.

2. Designation

International Service Fund	US\$
Amelia Earhart Fellowship Fund	US\$
Jane M. Klausman Women in Business Scholarship Fund	US\$
Young Women in Public Affairs Award Fund	US\$
Rose Fund	US\$
Endowment Fund	US\$
Amelia Earhart Fellowship Endowment Fund	US\$
Total Foundation Contribution US\$	

3. Authorization

Please charge my Visa® MasterCard® in the amount of US\$ _____ Monthly Quarterly

First payment: Day (1,2,3, ...) _____ Month (Jan, Feb, ...) _____

Card Number _____ Exp. Date ____ / ____ Security Code _____ (three digits)

Name of Cardholder (as it appears on the card) _____

Billing Address (if different from above) _____

Cardholder Signature _____

