



Women's Gift Alliance

The Sprouting Fund membership is offered to women 40 years old or younger. This is designed as a first year scholarship of \$500, with the new member paying \$600. In years two and three, you will pay the regular Membership Commitment of \$1,100. These Scholarships have been made available through a generous, anonymous donor, who deeply believes in the power of women working together to help others through pooled resources.

YOUR COMMITMENT - YEAR ONE

1. Pay \$600 the first year
2. Agree to serve on a Committee for one year
3. Attend one WGA function your first year
4. Vote on the pooled Grant recipients

YOUR COMMITMENT - YEARS TWO AND THREE

1. Pay \$1,100 in each of years two and three of membership
2. Vote on the pooled Grant recipients
3. Designate your individual gifts of \$250 each year
4. Attend functions and serve on Committees at your discretion

We believe you will find Women's Gift Alliance to provide a unique and compelling entry into local philanthropic work.

Through our Grant process, we learn the stories and share the frustrations and excitement of local people helping those most vulnerable in our community. All Grant funds awarded benefit residents of Kootenai County.

Please complete pages two and three, and return them to the address listed at the bottom of the form. If paying by check please include your check with the forms.

Welcome to the power of women working together in collective philanthropy!





Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email _____

Yes, I would like to become a Member of the Women's Gift Alliance (WGA), with the understanding my commitment is to contribute \$600 the first year, and \$1,100 in each year of the second and third years of membership.

Signature _____ Date _____

PAYMENT INFORMATION

Contributions are made directly to **Idaho Community Foundation**, a registered 501(c)(3) for accounting purposes only.

All grants and gifts are locally distributed and directed by our WGA membership.

Your full contribution is tax deductible, please verify with your accountant for your specific tax situation.

_____ Enclosed is my check in the amount of \$600. made payable to **Idaho Community Foundation**

_____ Charge my VISA _____ or Mastercard _____ in the amount of \$600.

Name on the Card _____

Account Number _____ Expiration Date _____

CVV (three digit Security Code on back of your card) _____

Your billing address _____

Signature for Credit Card Purchase _____ Today's Date _____

_____ Pay online, through secure portal. To access the payment portal, go to the WGA website,

Womensgiftalliance.org/Membership and you will see "Make Donation Online."

Please send any questions to: membership@womensgiftalliance.org

We respectfully request payment of your dues by December 1, 2024 for the 2025 Grant Cycle.

Please return your completed forms to:



Women's Gift Alliance

SPROUTING FUND - MEMBER INFORMATION 2025

Name _____

Welcome to WGA! The mission of the Women's Gift Alliance is to pool the talents and resources of women to provide meaningful financial support to a broad range of charitable, cultural and educational projects within our North Idaho community. We thank you for your financial commitment, and welcome your personal commitment of time and skills.

How did you learn about WGA? _____

Would you be willing to share your professional expertise or nonprofit experience with the WGA and our membership?
If so, in what way?

Please indicate your Committee choice for your first year of membership:

_____Membership _____Education _____Grants _____Communication _____Finance

Are there organizations or projects within Kootenai County that you'd recommend we notify about our Grant application process?

Please indicate where you typically prefer to receive communications, checking all that apply:

_____Email _____E-newsletter _____Printed Newsletter _____Mailings _____Facebook _____Phone Call _____Text

WGA PRIVACY POLICY

The Women's Gift Alliance may publish or display the names of its members from time to time, to acknowledge their contributions, and to promote the development of the WGA. A member's contact information (addresses, emails, phone or the like) will not, however, be disclosed, published or displayed in that process. If you prefer to remain completely anonymous, you may opt-out of any publication, display or use of your name by or for the Women's Gift Alliance by simply initialing the box below:

I prefer to remain anonymous in my participation in the Women's Gift Alliance.