

Friends of WRR New Member and Renewal Form

Please choose member ty	ne:				
☐ New Member	☐ Renewing Member				
"Thank You" Gifts					
☐ Yes, please send	☐ No, I declir	ne			
Please choose your dona	tion amount:				
□ \$25 □ \$50	□ \$101	□ \$500	□ \$1,000	☐ Other _	
Please choose payment in Check (enclosed)	nethod: □ Credit Card	d			
Credit Card Processing:	☐ American F	Express \square Ma	astercard 🗆 V	√isa □ Discover	☐ Other
I authorize the Friends of this purchase in accordan				credit card provide	ed herein. I agree to pay for
Name (First and Last name, please print)			Second name on membership card		
Address			City	State	Zip
Phone			E-mail		
16-digit credit card num	ber				
Expiration Date			CVC Number (back of the card)		
Signature:			Date:		

Please return this completed form to finalize your donation. Email to membership@friendsofwrr.org, or mail to Friends of WRR, P.O. Box 12323, Dallas, TX 75225.