



**Donor Information**

Name:

Address:

City/State/Zip:

Phone Number:

Email:

**Pledge Information**

I pledge a total of \$ \_\_\_\_\_

**Payment Options**

- Donation made online: [www.wcmqt.org](http://www.wcmqt.org)
- Check Enclosed (*payable to Women's Center*)
- VISA    MASTERCARD    AMEX

Card Number:

Expiration:

CCV:

Billing Zip Code:

Authorized Signature:

**Acknowledgement Information**

- Please use the following name in all acknowledgments:
- Donation in Honor of:
- Donation in Memory of:
- I wish to remain anonymous
- I give permission for Women's Center, Inc. to share my story on Social Media  
*Please tell us what being a part of the 100 Good Men campaign means to you  
(use back of paper for more room):*