

Please print legibly!

**KENTUCKY RELIGIOUS COALITION FOR REPRODUCTIVE CHOICE**

PLEASE PRINT

<b>Name(s):</b>			
<b>Street:</b>	<b>City:</b>	<b>ST:</b>	<b>Zip Code:</b>
<b>E-mail:</b>		<b>Phone: (include area code)</b> (      )	
<b>Religious affiliation (optional):</b>			<input type="checkbox"/> I am a clergy person.
<input type="checkbox"/> Yes, I want to help. Please contact me about volunteer opportunities.			

**MY ENCLOSED KRCRC DONATION**

<input type="checkbox"/> Trustee..... \$1,000 or more <input type="checkbox"/> Patron..... \$500-999 <input type="checkbox"/> Advocate..... \$250-499 <input type="checkbox"/> Guardian..... \$100-249 <input type="checkbox"/> Supporter..... \$1-99	<input type="checkbox"/> <b>Special occasion or memorial gift.</b> Please describe the occasion and provide name and address of person to whom acknowledgment should be sent.
<b>Check Yes or No</b>	
Please <b>PRINT MY NAME</b> on KRCRC published donor lists, e.g. the newsletter. <input type="checkbox"/> YES <input type="checkbox"/> NO	Please <b>SEND A POSTCARD</b> to my state legislators asking them to represent my pro-choice views. <input type="checkbox"/> YES <input type="checkbox"/> NO
Please make your check <b>payable to KRCRC:</b> <i>The IRS recognizes KRCRC as a Section 501(c)(3) nonprofit charitable organization. All donations are tax-deductible to the extent provided by law.</i>	

Mail form with donation to:

KRCRC  
P.O. Box 4065  
Louisville, KY 40204