



Kinnickinnic
River Land Trust

KINNI GUARDIANS

Conserving and Protecting the Kinni

Sustaining Membership Giving Club Pledge Form

DONOR INFORMATION (Please type or print)

Date: _____

Last Name: _____ First Name: _____ M.I.: _____

Last Name: _____ First Name: _____ M.I.: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Email-1: _____ Email-2: _____

ACKNOWLEDGMENTS

Please use the following name(s) in all acknowledgements: _____

____ I (we) wish to have our gift remain anonymous

DONATION INFORMATION

As a *Kinni Guardian*, I/we agree to give the sum of **\$1,200.00** or ____ other \$_____ (please specify amount)

____ Annual payment or ____ Monthly payments (please check one)

Signature: _____ Date: _____

CONTRIBUTION FORM

I (we) plan to make our contribution in the form of:

___ Cash ___ Check ___ Automatic Deduction ___ Online at www.kinniriver.org ___ Stock* ___ Grant

Amount Enclosed: \$ _____

***GIFTS OF STOCK AND STOCK TRANSFERS (PLEASE NOTIFY KRLT OFFICE OF YOUR STOCK GIFT)**

Contact Edward Jones (phone 715.425.9278), and have the stock transferred to Account #81906583-1-3, DTC #0057, Kinnickinnic River Land Trust, Inc.

Please make checks, corporate matches and stock transfers payable to: The Kinnickinnic River Land Trust, Inc.

Mail this form and payments to: Kinnickinnic River Land Trust, PO Box 87, River Falls, WI 54022

Questions? Please contact 715-425-5738 or email: info@kinniriver.org