

The Soroptimist Stargazers are an incredible community of generous, passionate, and devoted individuals like YOU. They are an unstoppable force, creating positive and lasting change in the lives of women and girls around the world—**and we think you're going to fit right in!**

Each month, your contribution will be automatically processed, allowing you to steadily build your recognition in the Laurel Society while providing thousands of women and girls with the tools they need to succeed!

We envision a day when every woman and girl is ensured a brighter future, reaches her full potential, and lives her dream.

You will be receiving a starshaped Stargazer Monthly Giver pin to honor your commitment and generosity. Please wear it with pride your to virtual and in-person SIA events.

Together we have the power to make dreams a reality!

Sustaining Our Dream Programs Soroptimist Stargazers

ENROLLMENT FORM

YES! I am ready to become a Soroptimist Stargazer!

DONOR NAME	MEMBER ID (if applicable)		
DAYTIME PHONE		EMAIL ADDRESS	
ADDRESS			
CITY	STATE	ZIP/POSTAL CODE	
COUNTRY			
SELECT YOUR MONTHLY GI	FT AMOUNT (US\$):		
\$25 \$50 \$75	■ \$100		
Donor wishes to remain ano	nymous		
PLEASE APPLY MY GIFT TO:			
Unrestricted Support	Dream It, Be It: Career Su	pport for Girls®	
Live Your Dream: Education	& Training Awards for Women®		
SELECT A GIVING OPTION:			
		nclosed is a voided check that shows the future gifts will be transferred directly	
	ation. Please transfer my monthly rred directly from my credit card.	gifts from my credit card. I understand	
VISA	_MASTERCARD	AMERICAN EXPRESS	
CARD NUMBER	EXPIRATION DATE	SECURITY CODE	
CARD HOLDER'S NAME (pleas	e print)		

DATE

THANK YOU FOR YOUR CONTRIBUTION! PLEASE SUBMIT THIS FORM:

SOROPTIMIST INTERNATIONAL OF THE AMERICAS, INC.® PO Box 95000 - 2553, Philadelphia, PA, USA 19195-0001 PHONE: 215-893-9000 FAX: 215-893-5200 EMAIL: development@soroptimist.org