



Masala Giving Circle

Date _____

Name _____

Address _____

City, State, Zip _____

Cell Phone Number _____ Email Address _____

Referred by:

_____ **Committee Interest(s)**

Grants _____ Membership _____ Communications _____ Finance _____ Programs _____

- **Administrative Fee:** \$50.00 Yearly (due upon joining Masala and by 10/31 each subsequent year)
- **Payment Instructions (You may Zelle or Mail)**
- **If you Zelle, please email this application to Avolon@verizon.net**

If you Mail: Send completed application with your \$50.00 administrative fee

<p>Mail: Masala Giving Circle P.O. Box 50002 Sarasota, FL 34232</p>	<p>Zelle: Send to: masalagc2024@gmail.com</p>
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Masala Giving Circle contribution: Minimum \$300.00 Yearly (due to CFSC by 12/31)

Payment Instructions

Online (**preferred**): Visit the Community Foundation of Sarasota County on-line payment website.

Website: <https://www.cfsarasota.org/donors/support-our-community>

Select *Masala Giving Circle* from the Funds list and click **DONATE**. **OR**

By check: Make your contribution payable to the Community Foundation of Sarasota. On the memo line please write Masala Giving Circle. Mail to: The Community Foundation of Sarasota County , 2635 Fruitville Road , Sarasota, FL 34237

Contributions are fully tax deductible to the extent of the law.

www.masalagivingcircle.org

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