

International Paruresis Association ~ Donor Form

Our Vision: To Champion Paruresis Awareness

Mail this form with your check or money order (international money order if outside the USA) to:

IPA, Inc.
P.O. Box 21237
Catonsville, MD 21228

DONOR INFORMATION ~ PLEASE PRINT

| | |
|--|------------------------------|
| NAME: | |
| ADDRESS: | |
| PHONE NUMBER: | This is your: Cell Home Work |
| EMAIL ADDRESS: | |
| CHECK ONE: <input type="checkbox"/> 1 st Time Donor <input type="checkbox"/> Membership Renewal | |

Can we contact you via the following? (Circle all that apply) Email Letter Phone

WAYS OF GIVING (check one)

| | |
|---|--|
| <input type="checkbox"/> Anonymously Amount of donation \$ _____ | <input type="checkbox"/> \$25.00 Low Income/Student Membership |
| <input type="checkbox"/> \$50.00 IPA Membership | <input type="checkbox"/> \$100.00 IPA Plus Membership |
| <input type="checkbox"/> \$250.00 IPA One Star Membership | <input type="checkbox"/> \$500.00 IPA Two Star Membership |
| <input type="checkbox"/> \$1,000.00 IPA Three Star Membership | <input type="checkbox"/> \$2,500.00 IPA Bronze Membership |
| <input type="checkbox"/> \$5,000.00 IPA Silver Membership | <input type="checkbox"/> \$10,000.00 IPA Gold Membership |
| <input type="checkbox"/> \$25,000.00 IPA Platinum Membership | <input type="checkbox"/> \$50,000.00 IPA Titanium Membership |
| <input type="checkbox"/> \$75,000.00 IPA Palladium Membership | <input type="checkbox"/> \$100,000.00 IPA Rhodium Membership |

Is this donation being made in memory or honor of someone? If yes, please fill in the information below.
In honor or memory of:

Send an acknowledgement to:

Name: _____ Address: _____

Thank You for Your Donation!

The International Paruresis Association is a non-profit organization under the terms of the US Internal Revenue Code section 501(c)(3). As such an organization, contributions to IPA are tax-deductible.