

## **KCUR 89.3 SUSTAINING MEMBER ENROLLMENT FORM**

Thank you for choosing to become a sustaining member of KCUR!

Cor	mplete your enrollment at <b>kcur.org/</b> s	<b>sustainer</b> or fill out	the information below.
ME	MBER NAME(S)		
ADDRESS		CITY/ STATE/ ZIP	
PHONE		EMAIL ADDRESS	
I a	RMS uthorize KCUR 89.3 to process a control count or debit/credit card in the amou \$7/month \$12.50/month	nt of:	from my checking
	NDITIONS nderstand:		
	This authorization is ongoing, automatically renewing from year-to-year, and w remain in effect until I notify KCUR. Changes to bank transfers (EFT) must be made in writing.		
	Monthly bank transfers (EFT) will occur on the 5 <sup>th</sup> day of each month. Monthly debit/credit card charges will occur within the last five days of each month.		
	For tax purposes, I will receive a sum of each calendar year.	nmary of my monthl	y donations at the end
SIC	GNATURE (sign here to accept ter	ms)	DATE
СО	MPLETE YOUR SUSTAINING MEME	BERSHIP ENROLL	MENT:
	<ul> <li>For bank transfers (EFT), attach a voided check or other document imprinted with your checking account number from your banking institution.</li> </ul>		
	<ul><li>For debit/credit card, please provi kcur.org/sustainer:</li></ul>	de your card inform	ation here or online at
Car	rd Number (Visa, MasterCard, Discove	er, American Expres	s) Expiration Date