



Fidelity Club Enrollment Form



Donor Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

Lodge No.: \_\_\_\_\_ ENF Donor ID: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Option 1. Direct Debit

[ ] Please draft my bank account\* [ ] monthly or [ ] quarterly. (Enclose a voided check for accuracy.)

Bank Draft Start Date (circle one): 15th or 25th

Monthly Draft Amount: \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Option 2. Credit Card

[ ] Please charge my credit card\* the agreed [ ] monthly or [ ] quarterly amount of: \$ \_\_\_\_\_

[ ] Visa

[ ] MasterCard

[ ] Discover

[ ] American Express

Acct. No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

New Option: Designate your gift! If you choose not designate a program fund, your gift will be invested in the ENF Endowment Fund and distributed to all ENF programs.

[ ] Please designate my gift to fund my favorite program (circle one):

Community Investments Drug Awareness Hoop Shoot Scholarships Veterans Service

\*This agreement will remain in effect until the ENF receives written notification of termination. Quarterly donations will occur every three months after the first gift.

Return this form to:
Elks National Foundation
2750 N. Lakeview Ave.
Chicago, IL 60614-2256

For more information, visit www.elks.org/enf/recurringclub.cfm, or contact the ENF office at enf@elks.org or 773/755-4728.