



PolioPlus Society

(Charter Member)



I hereby pledge to make an annual donation to the PolioPlus Fund of
The Rotary Foundation (select one of the following)

\$100/year

\$250/year

\$500/year

1,000/year or more

\$_____ /year to PolioPlus (Minimum \$100)

Online: EndPolio.Org/Donate

Check: To: The Rotary Foundation w “**PolioPlus**” in memo field

Name: _____

Club Name: _____

Email: _____