



CAND Foundation Contribution Form

AND MEMBER # _____

NAME: _____

PREFERRED EMAIL ADDRESS: _____

CANDF contributions may be deducted for some donors. Please discuss with your tax advisor.

MY CONTRIBUTION IS.....

CAND Foundation 3 Star Partner	\$1,000.00 - and above	\$
CAND Foundation 2 Star Partner	\$500.00	
CAND Foundation Partner	\$250.00	
Club 100	\$100.00	
My Contribution	\$5.00-\$99.00	
Direct Contribution to Fund listed below (optional):		

PAYMENT BY: CHECK / MONEY-ORDER / PAYPAL (access at www.dietitian.org) or **MASTER CARD, VISA, DISCOVER** (no other credit card accepted)

CARD NUMBER _____

EXP. DATE _____ TOTAL _____

CARD HOLDER NAME _____

CARD HOLDER SIGNATURE _____

Thank you for Your Contribution

RETURN CONTRIBUTION TO

Payable to: California Academy of Nutrition and Dietetics Foundation (CANDF)

7740 Manchester Ave, Suite 102, Playa del Rey, CA 90293-8449

or Fax with credit card payment to 310/823-0264

or Scan and Email with credit card payment to patsmith@dietitian.org

or PayPal at www.dietitian.org

310/822-0177 Central Office - 310/823-0264 Fax