



YES, I GIVE MY SUPPORT!
YMCA of Youngstown 2018 Annual Campaign

DONOR INFORMATION

Name/Company: _____ Contact: _____
Email: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (best contact number) _____

MY GIFT

I would like to impact lives with a gift of: \$ _____
I would like to designate my gift to the following:
(may be split)
 Central Y \$ _____
 Davis Y \$ _____
 Camp Fitch Y \$ _____

CHAIRMAN'S ROUNDTABLE

For gifts of \$1,000 +, a banner will be displayed at the Y in recognition of your donation. Please indicate the Name or Business Name for banner:

AREAS OF INTEREST

Your generosity impacts lives. Check the area(s) you would like to hear how you are making a difference.

- LIVESTRONG® at the YMCA Youth Programs Arts & Humanities Senior Programs

PAYMENT OPTIONS

Check Enclosed (make check payable to YMCA of Youngstown OR for gifts of \$100-\$5,000, please make check payable to Youngstown Foundation and they will match 5% of your gift)
 Credit Card Card #: _____ Expiration Date: ____/____
Authorized Signature: _____

Invoice/Bill me: IN FULL MONTHLY QUARTERLY

Mail in your pledge form to one of the addresses below OR email to pledge@youngstownymca.org

My gift will be matched by: _____

ACKNOWLEDGEMENT/TRIBUTE

Please use the following name(s) in recognition of my gift: _____

This gift is being made In Honor of: In Memory of: _____

- I wish this gift to be anonymous
 I would like to learn more about legacy giving to the YMCA.

CENTRAL YMCA
17 N. Champion St.
PO Box 1287
Youngstown, OH 44501
P 330 744 8411

DAVIS FAMILY YMCA
45 McClurg Road
Boardman, OH 44512
P 330 480 5656

CAMP FITCH YMCA
12600 Abels Road
North Springfield, PA 16430
P 814 922 3219

OFFICE USE ONLY

Campaigner Name: _____ Date: _____

Check #: _____ Receipt #: _____