



Northfield Area Family YMCA

I would like to make a total contribution of

\$1,500 \$1,000 \$500 \$350 \$200 \$100 Other _____

Name: _____

Check enclosed Bill me later (mo, qtrly, semi-annual)
(credit card and monthly gift options on reverse side)

Address: _____

City/State/Zip: _____

Home Phone: _____

Print name as you would like the gift to be acknowledged:

Work Phone: _____

Email: _____

Thank You! Your contribution is tax deductible.

Visa MasterCard Discover

Card #: _____ Expiration Date: _____

Name on card: _____

Monthly withdrawal from checking or savings account

Bank routing #: _____

Bank account #: _____

**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

519 Division Street
Northfield, MN 55057
507-645-0088
www.northfieldymca.org

At the YMCA, we provide programs that strengthen the family, support youth development and champion life-long good health & wellness. **Thank you for your support!**

Northfield Area Family YMCA
519 Division Street (mailing address)
205 W 3rd (physical office location)
Northfield, MN 55057
507-645-0088