

# Northfield Area Family YMCA



Donor Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email \_\_\_\_\_



## PLEDGE INFORMATION

I/we would like to make a total annual Y Annual Campaign contribution in the amount of \$ \_\_\_\_\_

## CONTRIBUTION METHOD

I/we will pay by  cash  check  debit/credit card  other (please explain) \_\_\_\_\_

I/we would like to be a **Sustaining Donor**. Please deduct my bank/credit card account on file  monthly  other \_\_\_\_\_

Please deduct this bank/credit card number \_\_\_\_\_ exp \_\_\_\_ / \_\_\_\_  monthly  other \_\_\_\_\_

Please invoice me  annually  semi-annually  quarterly  monthly  other \_\_\_\_\_

**ACKNOWLEDGEMENT** Please print name(s) as you would like it/them to appear in formal recognitions and/or publications.  
\_\_\_\_\_

I/we would like to be recognized on a gym banner (\$500-\$5000 donations; hangs in the gym for one year)

I/we would like this gift to be anonymous and do not want to be listed for recognition.

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Northfield Area Family YMCA 1501 Honeylocust Dr / Northfield, MN 55057 / 507.645.0088 / [www.northfieldymca.org](http://www.northfieldymca.org)