



**Leadership  
Development**

# Ron Griffith Young Leaders Fund

Northfield Area Family YMCA \* Just Food Co-op Partnership

I wish to make a total contribution in the amount of \$ \_\_\_\_\_.

Payable

Name: \_\_\_\_\_

In Full: \_\_\_\_\_

Address: \_\_\_\_\_

Mo/Qtrly: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Other: \_\_\_\_\_

Home Phone: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

**Thank You! Your contribution is tax deductible.**

Personal Check payable to: YMCA/Ron Griffith Young Leaders Fund

Credit Card

Visa

MasterCard

Discover

Does your company have a  
matching gift program?

YES

NO

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Name on card: \_\_\_\_\_

I agree to pay above total amount according to the card issuer agreement:

Contributor:

X \_\_\_\_\_

Submitted by:

X \_\_\_\_\_



YMCA  
We build strong kids,  
strong families, strong communities.

**Northfield Area Family YMCA  
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