



DONATION FORM

Building strong kids, strong families
and a strong community.

Northfield Area Family YMCA

Donor Name(s) _____

Address _____

Home Phone _____ Work Phone _____ Email _____

PLEDGE INFORMATION

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

PAYMENT 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 gift monthly other _____

Please deduct this bank/credit card number _____ Exp. date ____/____/____

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 (annual gifts of \$500 and above will be recognized on a banner in the gym for one year).

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

I am interested in learning more about the YMCA Endowment Fund.

Donor Signature _____ Date _____

To Submit You Can:



DROP OFF

1501 Honeylocust Dr
Northfield, MN 55057



MAIL IN

1501 Honeylocust Dr
Northfield, MN 55057



FAX

507-645-8188

The Northfield Area Family YMCA Tax ID # is: 59-3817686. Your contribution is tax deductible as allowable by law.

Northfield Area Family YMCA 1501 Honeylocust Drive / Northfield, MN 55057 / 507.645.0088

To donate online, visit our website at www.northfieldymca.org and click Give.