



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

STRENGTHENING OUR FOUNDATION

Commitment Form

I would like to make a gift to the Foundation YMCA Strengthening Our Foundation Campaign

Donor/Company Name(s) _____

Contact Name (if different than above): _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I/We pledge a total of \$_____ in support of the Foundation YMCA of Wilson.

Each donation of \$5,000 will be recognized as a Chevron on our Capital Campaign Wall

I/We will pay my pledge in installments Quarterly Monthly Annually Please send pledge reminders

Payments of \$_____ for a total gift of \$_____, beginning ____/____/_____

I/We will pay the total pledge in one payment on ____/____/_____

Payments may be spread out over the course of 3 years

I plan to make a contribution in the form of: Cash Check (Please make payable to Foundation YMCA)

Debit/Credit Card Stock Transfer

Debit/Credit Card Information: Visa Mastercard

Credit Card # _____ Exp. Date _____

CSV _____ Cardholder's Signature _____

DONOR RECOGNITION AND AGREEMENT

Choose one of the following and please fill out the form below as you would like it to appear in formal recognitions and/or publications:

Option #1- Your Name: _____

Option #2- In Memory of: _____

Option #3- In Honor of: _____

Please check here if you would like your gift to be anonymous ____

By this pledge, I/we have read and understand the Policy for Recognition of Leadership and Philanthropic Support and are making a binding commitment to give the amount specified. The Foundation YMCA is a nonprofit, tax-exempt organization under the provisions of Section 501c3 of the Internal Revenue Code. Donations are tax deductible to the extent allowed by the law. Tax-Identification number is 56-2220375.

Donor Signature _____ Date _____

Thank you for your support.

FOUNDATION YMCA OF WILSON

3436 Airport Blvd, Wilson, NC 27896 | 252 291 9622 | wilsonymca.org