



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

2011 Annual Giving Campaign Pledge/Donation Intention Form

I, _____, pledge support to the Indiana County YMCA in the amount of \$ _____ to the 2011 Annual Giving Campaign.

Enclosed is payment for my contribution in the amount of \$ _____. (Please make checks payable to the Y of Indiana County)

The remainder of the 2011 pledge will be payable on the following schedule:

(Please select 'bill me' or 'credit card'.)

Please bill me debit my credit card Quarterly Monthly

Please complete this section if selecting credit card option.

Credit Card Type: Visa Master Card Discover

Credit Card #: _____ Expiration: _____

Please acknowledge this gift in all printed materials as follows: (include any in honor of or tribute language.)

Name: (please print) _____

Signature: _____ Date: _____

(Please sign to authorize pledge and/or to provide permission for credit card transaction.)

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

(All acknowledgment letters and other corresponding related to this gift will be sent to this address.)

Please return form and any payments to: *2011 Annual Giving Campaign*
Audrey Shaffer
Indiana County YMCA
60 W. Ben Franklin Road
Indiana, PA 15701
724-463-9622