



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Name _____

Spouse/Partner _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Employer _____ My employer has a matching gift program.

***Below Gifts are designated toward the Amelia Peabody Charitable Fund Challenge Grant 2018
Your gift is 100% tax deductible.***

I wish to make a Personal Gift prior to 12/15/18 I wish to make a Business Gift prior to 12/15/18

\$ _____ (Gifts of any amount make a difference.)

I pledge a gift amount of \$ _____ to be paid by (date) _____
(must be paid by 12/2019)

As a check payable to Hampshire Regional YMCA

\$ _____ added to my monthly bank draft starting (month) _____

Charged \$ _____ to my credit card: Mastercard Visa

Card Number _____ Exp. _____ Security code _____

Name (as it appears on card) _____

As a donation from my Donor Advised Fund (fund name): _____

Please contact me regarding a gift of securities.

Please contact me regarding planned giving.

I would like my gift to remain anonymous.

Signature _____ Date _____

**Thank you for your gift to our Amelia Peabody Charitable Fund Challenge Grant. Please mail this form back to
the YMCA or email to nicole.prucnal@hrymca.org by 12/12/18**