



# GLOW YMCA TRANSFORMING LIVES CAPITAL CAMPAIGN

## PLEDGE AGREEMENT

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## PLEDGE INFORMATION

I pledge a total of: \$\_\_\_\_\_ to the Genesee County YMCA Transforming Lives Capital Campaign.

- I prefer to make a one-time donation.
- Enclosed is a check. (Make check or money order payable to the GLOW YMCA.)
- Charge my account:  VISA  Mastercard

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

## OR

- I wish to spread my donation over  1  2  3 Year(s), beginning in \_\_\_\_/\_\_\_\_ (mo/year).

GIFT	20 <u>21</u>	20 <u>22</u>	20 <u>23</u>	3 YEAR TOTAL
Capital	\$	\$	\$	\$

Please send pledge reminders:  Annually  Semi-annually  Quarterly beginning in \_\_\_\_/\_\_\_\_ (mo/year).

I plan to make a contribution in the form of:  Cash/Check  Credit Card  Other \_\_\_\_\_

- Charge my account:  VISA  Mastercard

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

## ACKNOWLEDGMENT

Please print your name as you would like it to appear in recognition: \_\_\_\_\_

- I would like my gift to be anonymous and do not want my name listed for recognition

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: Donations are tax deductible to the extent allowed by the law. Questions regarding tax deductibility of contributions should be referred to your tax advisor.

## DOUBLE YOUR IMPACT! MATCHING GIFT CHALLENGE

Peter Zeliff has provided a community challenge grant to help us build our **new Healthy Living Campus!** Until September 30, 2021, he will match dollar for dollar all new **Transforming Lives** pledges up to \$500,000.

**PLEDGE BY SEPTEMBER 30, 2021 AND DOUBLE YOUR GIFT!**

**Genesee County YMCA – 209 East Main Street – Batavia – 14020 -585-344-1664 - [www.glowymca.org](http://www.glowymca.org)**