



BUTLER COUNTY FAMILY YMCA ANNUAL SUPPORT CAMPAIGN

Find your reason to give. Find your Y!

2022 PLEDGE FORM

BUTLER YMCA | ROSE E. SCHNEIDER FAMILY YMCA | ARMCOPARK

STEP 1: YOUR INFORMATION

| | | | | |
|--------------|--------------|---------------|-----------|----------|
| Mr./Mrs./Ms. | First Name | M.I. | Last Name | |
| Home Address | | City | State | Zip Code |
| Employer | Phone Number | Email Address | | |

STEP 2: YOUR GIFT

This gift is a: Personal donation Business donation

One Time Gift in the amount of \$ _____ on _____
(total dollar amount) (month/day/year)

Monthly Gift in the amount of \$ _____ per month for _____ months, starting on _____
(amount per month) (number of months) (month/day/year)

Additional Gift Information

My gift will be matched by _____
(Company/Foundation name and address)

My gift is being made in honor of in memory of _____

Name/Address of person receiving notification of your gift _____

STEP 3: PAYMENT METHOD

Cash Check (please make checks payable to: Butler County Family YMCA)

Bill my Membership Account (billed to the card on your account)

Credit Card

Card Type: Visa American Express MasterCard Discover

Name: _____ Card Number: _____ Exp. Date: _____
(as it appears on the card) (month/year)

Security Code: _____ Authorized Signature: _____ Date: _____

By my/our signature(s) below, I/we represent that the information contained herein is true and I/we are committed to supporting the 2022 Butler County Family YMCA Annual Support Campaign through my/our payment/pledge as indicated on this form.

Signature(s) _____ Date _____

The Y is the leading nonprofit committed to strengthening community by connecting all people to their potential, purpose and each other.
To donate online, visit: www.bcfymca.org/giveback